

Abilene Animal Services (AAS) Volunteer Application

(Minimum age is 13. Volunteers aged 13 – 15 must be accompanied by a parent at all times. All volunteers must attend orientation.)

NAME: _____ DATE: _____

ADDRESS: _____ CITY/ZIP: _____

EMAIL: _____

PHONE (MOST LIKELY TO ANSWER): _____

WHY DO YOU WANT TO BE A VOLUNTEER: _____

PLEASE DESCRIBE OTHER VOLUNTEER EXPERIENCE: _____

DO YOU HAVE ANY AFFILIATIONS WITH OTHER ANIMAL RESCUE GROUPS, SHELTERS OR ANIMAL ORGANIZATIONS? IF YES, WHICH AND PLEASE DESCRIBE THIS AFFILIATION AND YOUR ROLE: _____

LIST ANY LIMITATIONS ON WORKING WITH OR NEAR CERTAIN TYPES OF ANIMALS: _____

DESCRIBE ANY ANIMAL RELATED EXPERIENCE: _____

DESCRIBE ANY EXPERIENCE WORKING WITH THE PUBLIC: _____

LIST OTHER SPECIAL SKILLS OR EXPERIENCES: _____

Initials _____ I understand that if accepted as a volunteer my email address may be shared with other volunteers for the purposes of volunteer related communications and event coordination.

Initials _____ During my volunteer activities with AAS, I understand that my photo may be taken at various events and projects. By initialing, I also hereby grant AAS and the City of Abilene permission to use my likeness in photograph(s) and/or video(s) in any and all of its publications or on the internet, whether now known or hereafter existing. I will make no monetary or other claim against AAS for the use of the photograph(s) and/or video(s).

Signature or Parent's (if under 18)

_____ Date _____