Volunteer Application

Name:	Date:						
Address:							
Email:							
Hm Phone: ()	Cell Phone: ()					
Age: Occupation:							
Driver's License Info:							
State: License	#	Expiration:					
Do you have any animal rela	ted experience?						
What days would you be ava	ilable to volunteer?						
Please let us know which typ	es of volunteer work you	would be most interested in doing:					
Dog and Cat Socialization	·	· ·					
Office Work (social media		tion flyers)					
Animal Fostering		, ,					
Photography (events & a	doptable animals)						
Grooming							
Special Events/Fundraisi	ng						
Posting flyers around tow		al events					
	·						
	References						
Name:	Phone:	Relationship					
Name:	Phone:	Relationship					
Name:	Phone:	Relationship					

Criminal History

Have yo	u ever beer	charged with	or convicted of	a felony or first	t degree misdemeanor?
Yes_	No	When:			-
Where:	City:		State:	County:	
			s answer will no n, please fully ex		revent you from mstances.)
Voices o during r provide and/or a	f Chance Ainy training VOCAL. I	nimal League, I period. I wi agree to hold gents from all	Inc. (VOCAL), a Il not receive a harmless, Voice	nd these guide any monetary c es of Chance A ns for damages	all established guidelines of lines will be explained to me compensation for services I nimal League, Inc. (VOCAL) I may occur as a volunteer
Signatur	e:				Date:
	print a	nd sign above	e		
In case	of emergen	cy please conta	act:		
Name: _		F	Relationship:	Phon	e:
Please re	eturn this a	pplication via r	mail/fax or ema	il to:	

Voices of Chance Animal League, Inc. (VOCAL) 17500 Mahan Drive Tallahassee, FL 32309

Phone: 850-668-5999 - Fax 850-668-5998

Email: angie@BeVOCAL.org