

OFFICE USE:
 PD VOL

Volunteer and Make a Difference

LONGMONT HUMANE SOCIETY

VOLUNTEER APPLICATION



Please turn in at Orientation

Today's Orientation Date: _____

Please fill in all blanks completely and clearly. If we can't read it, we can't reach you!

Name: _____

Home Address: _____ City: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Email Address: _____

Emergency Contact: _____ Phone: _____

Relationship: _____

What special skills, training or hobbies do you have to offer as a volunteer for LHS?

Are you fluent in a second language? If so, what language(s)?

Other than minor traffic offenses, have you ever been convicted of a criminal offense?

I confirm that all information supplied on this application is true and correct.

Signature _____ Date _____

Thank you for your interest in and support of Longmont Humane Society!

Please Select Your Volunteer Assignment (please only mark **one**)

Client Care Team	Clinic Volunteers	Animal TLC
<input type="checkbox"/> Administrative Support	<input type="checkbox"/> Surgical Assistant	<input type="checkbox"/> Dog TLC
<input type="checkbox"/> Adoption Assistant	<input type="checkbox"/> Well Pet Greeter	<input type="checkbox"/> Feline Friends
<input type="checkbox"/> Intake Desk	<input type="checkbox"/> Well Pet Receptionist	<input type="checkbox"/> TEAM
<input type="checkbox"/> Visitation Coordinator	<input type="checkbox"/> Administrative Assistant	

As needed positions (you may select as many as you would like)

Thrift Store

Fleece for Furry Friends

Foster Home Inspector

Special Events

Facility Maintenance

The Pack

Transport

Do you have a valid driver's license and access to a vehicle? _____

Is the vehicle covered by liability insurance? _____

We will cover all of these positions (and more) at the volunteer orientation!

Please let us know if you have questions! Welcome to the team.