

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"/> Animal TLC
<input type="checkbox"/> Adoption Assistant	<input type="checkbox"/> Well Pet Greeter	
<input type="checkbox"/> Intake Desk	<input type="checkbox"/> Well Pet Receptionist	
<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: 1) Do you have a valid driver's license and access to a vehicle? _____

2) 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.