SOUTH PACIFIC COUNTY HUMANE SOCIETY (SPCHS)



(360) 642-1180 - volunteers@beachpets.com

VOLUNTEER APPLICATION

Thank you for your interest in volunteering at the South Pacific County Humane Society!!

Our Volunteers are essential to the success of the shelter.

In order for us to schedule our staff and ensure the best possible care for the cats and dogs in our care, we will need to understand your level of commitment. Since all positions require some level of training, reading the Volunteer Handbook and providing contact information, a 6 month commitment is requested. We understand that this might not be possible for you and we welcome those volunteers who require flexibility and have limited time. Below is a list of possible positions and the level of commitment.

- ➤ General dog/cat care, cleaning kennels, cages, feeding and training. (1 day a week for at least 2 hours)
- Laundry (1 day a week for at least 2 hours)
- Front Desk (1 day a week for at least 4-5 hours)
- Front Desk Assistant (2 days a month for at least 4-5 hours)
- Dog Walker/Socializing (Flexible)
- > Cat Cuddler (Flexible)
- ➤ Building Maintenance/Washing Windows (Flexible)
- ➤ Gardening (Flexible)
- ➤ General Cleaning (Flexible)
- ➤ Animal Transport (As needed)
- Taking pictures of the animals/staff/volunteers and events (As needed)
- ➤ Fostering (As needed)
- > Data Entry (1 day a week for 2 hours)
- ➤ Grant Writing (Flexible)
- > Fund Raising (As needed)
- ➤ Board Member (10 hours per month)
- ➤ Groomer (As needed)

Please remember ALL position require some training and you will need to let the Shelter Manager or team leader know your planned schedule.

Complete the information on the other side of this form and return to shelter. You will be contacted by a member of the volunteer team within a week.

**Volunteers between the ages of 10-15 will need to have a parent/guardian with them during volunteer activity.

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SOUTH PACIFIC COUNTY HUMANE SOCIETY (SPCHS) 330 2ND AVENUE NE / PO BOX 101 LONG BEACH, WASHINGTON 98631

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Applicant	iiioiiiauoii	•							
Name:							18 or older:		No
Mailing Ac	ddress:			(have parent or	guardian sign)		
Physical A	ddress:								
Telephone Number:					Cell:				
Email:									
•				ently involve		Shelter? Yes	s/No		
Please give experience	:	•		o do or would	-		-	elevant	past
Day(s) you c	an volunteer:								
	Sunday Closed	Monday Closed	Tuesday	Wednesday	Thursday	Friday	Saturday		
AM PM									
				I	Date				
Signature									
		SE ONLY:							
Received Application: Called Volunteer: Entered into PetPoint: Name of person who en							 Date		
Entered into	retroint		_ Name or pe	erson who ente	ereu/	,	Date		
Received Vo	olunteer Hand	dbook:	Rece	eived Signed A	cknowledgm	ent & Contac	t Sheet:		Date
Received training for:				Date:			Trainor:		
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