



FELINE FRIENDS INC.
P.O. Box 174
Feeding Hills, MA 01030-2133
(413) 786-5019
info@felinefriendsinc.org
www.felinefriendsinc.org

Volunteer Application

You can submit your volunteer application in one of these ways:

Email it to info@felinefriendsinc.org

Or mail it to PO Box 174, Feeding Hills, MA 01030

Name _____

Home Phone (_____) _____ Cell Phone (____) _____

Work Phone (_____) _____ Ext _____

Best time(s) to reach you by phone: _____

Email Address _____

Home Address _____

STREET

CITY

STATE

ZIP

Emergency Contact Name _____

Phone _____

Relation to you _____

How did you hear about Feline Friends? _____

Besides fulfilling your love for animals, what else do you hope to get out of your volunteer experience at Feline Friends?

Please describe any special skills or animal related experience you may have: _____

Do you have a cat allergy? Yes _____ No _____

Continued on reverse →



Which days of the week are you available to volunteer?

- Mon Tues Wed Thur Fri Sat Sun

What time of day are you available?

- Mornings Afternoons Evenings

How many hours per week are you willing to volunteer? _____ hours

Please briefly describe your previous work or volunteer experiencece:

| Employer | Supervisor | Phone or email | Date from | Date to | Reason for leaving |
|----------|------------|----------------|-----------|---------|--------------------|
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Please list three references (and notify them that we will be calling):

| Name of reference | Phone number | Relation to you |
|-------------------|--------------|-----------------|
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As a volunteer with Feline Friends, Inc., I understand the risks involved in working near or with any animal, including risk of personal injury. On behalf of myself, my heirs, personal representatives and executors, I hereby release, discharge, indemnify and hold harmless Feline Friends, Inc., its agents, servants and employees from any and all claims, causes of action, or demands, of any nature or cause, including costs and attorney's fees incurred by Feline Friends, Inc. in connection with the same, based on damages or injuries which may be incurred, or sustained by me in any way connected with my services for Feline Friends, Inc., including but not limited to animal bites, accidents or injuries.

Volunteer's Signature _____ Date _____

*****You must be 18 or older to volunteer for Feline Friends*****
We will get back to you as soon as possible! Thank you for applying!