

VOLUNTEER APPLICATION for ANIMAL SHELTER INC OF STERLING MA

Please return to:

MAIL: Animal Shelter Inc. – 17 Laurelwood Road – Sterling, MA 01564

FAX: 978 422 8574

Email STAFF@STERLINGSHELTER.ORG

Call the shelter at 978-422-8585

Your Name: _____ D.O.B. _____

Your Occupation: _____ Hours worked daily: _____

Address: _____

City/State/Zip: _____

Email: _____ Phone#: _____

Emergency Contact Name & #: _____ Cell Phone: _____

YOUR FACEBOOK ADDRESS so we can add you to our FACEBOOK NETWORK (a private group only for our foster families and volunteers) _____

Your Availability (we ask for a commitment of AT LEAST 8 HOURS a MONTH)

Monday _____
Tuesday _____
Wednesday _____
Thursday _____
Friday _____
Saturday _____
Sunday _____

- Please list any skills/services you might have that the shelter could benefit from your experience:

- Are there any tasks that you are not willing or able to do as a volunteer? If so, please list:

- Do you have any previous experience with animals? If so, please list

- Do you have pets at home? If so please list the pets you have and the species/breed/age (i.e. 1 Chihuahua mix spayed female 3 years old

- Are you uncomfortable around certain types of animals? If so, which ones? _____
- Are you able to volunteer independently, or do you require another person to be with you? ALONE or NEED HELP
- Have you ever been convicted of a crime against animals? YES or NO
- How did you hear about our shelter? _____

WOULD YOU CONSIDER BECOMING A FOSTER PARENT FOR ANY SHELTER PETS IN NEED OF EXTRA TLC? Learn about fostering <https://www.sterlingshelter.org/animal-shelter/how-you-can-help> - YES or NO