



Helping homeless and abused cats

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www.furryfriendswa.org

Tax ID 91-2002817

Student Volunteer Application

12 to 17 years old

Name: _____ Phone: _____ Alt. Phone: _____

Address: _____ City: _____ State: _____ ZIP: _____

Email Address: _____

Do you have reliable transportation? _____

Is this for a school project? _____ Due Date: _____ Number of Hours Needed: _____

Parent/Guardian Consent/Acknowledgement for Students under Age 18

If you are under 18 years of age, you must have your parent's or guardian's consent to volunteer.

(If under 18 years, what is your age? _____) If you are between 12 and 15 years of age, a parent or guardian must accompany you.

Initials: _____ Date: _____

I understand that Furry Friends does not carry insurance to cover my child and that there is a possibility of health or injury risk to humans and personal pets when caring for rescued animals and I hereby agree to hold Furry Friends harmless from any and all liability, damage or personal injury resulting from volunteer service.

Initials: _____ Date: _____

I give permission for Furry Friends volunteers to transport my child when necessary to complete volunteer service.

Initials: _____ Date: _____

I acknowledge that during my child's volunteer service, questions will arise and discussions occur with volunteers regarding reproduction, spaying and neutering, animal abuse, cruelty and neglect, declawing, and euthanasia of animals and this is acceptable to me.

Initials: _____ Date: _____

**WE RECOMMEND ALL VOLUNTEERS IN CONTACT WITH ANIMALS
HAVE A CURRENT TETANUS VACCINATION**

Student Volunteer Position

“SHELTER” ASSISTANT: 1-2 hour shift; must follow house procedures (a healthy, clean facility is critical); must be dependable (the cats rely on you); clean litter boxes, wash bedding, sweep, vacuum, feed/water, give medications, play with/socialize cats. ____

SUMMER OPPORTUNITIES MAY INCLUDE SPECIAL EVENTS: Staff a booth at fair/other venue; answer public’s questions and distribute FF information; be friendly, outgoing and professional with public and prospective volunteers. ____

PERSONAL HISTORY

What other organizations have you volunteered for, and what were your duties?

AVAILABILITY

Will you make a one-month commitment to Furry Friends? _____

When can you start?: _____

NOTE: Weekends and weekday evenings are typically students’ choices; openings may be limited.

Avail. Hrs	SUN	MON	TUES	WED	THURS	FRI	SAT
AM							
PM							

Signed: _____ Date: _____

Parent or Guardian – over 18 years of age

Accepted by: _____ Date: _____

FURRY FRIENDS Volunteer

Comments: _____

How did you hear about Furry Friends? _____



FurryFriends

