

739 Weidman Road
Manchester, MO 63011
636-227-1919 (office)
636-394-6877 (fax)



Volunteer Application

Last Name: _____		First Name: _____		Nickname: _____	
Address: _____		+ _____		City/State/Zip: _____	
Day Phone: (____) _____		Evening Phone: (____) _____			
Cell Number: (____) _____		E-mail: _____			
Date of Birth: _____					
If under 18 years of age, name of parent/guardian: _____					
Alternate Phone (from above): _____					
Emergency Contact & Relationship: _____				Phone: _____	

Why are you interested in becoming a volunteer at our shelter? _____

Describe any previous experience working with animals: _____

Occupation and Employer: _____

May we call you at work? _____ If yes, phone # _____

Educational experience (if currently in school, include name of school, grade and course of study):

List additional information that may be useful (i.e., special skills, training, interests, hobbies):

Please circle your answer to the following:

- Yes No 1. Are you willing to comply with our guidelines and procedures?
- Yes No 2. Are you able to walk a dog that weighs 50+ pounds?
- Yes No 3. Are there any animals you are unwilling to work with?
- Yes No 4. Are you allergic to animals? If yes, what kind? _____

- Yes No 5. Do you have any medical problems you feel we should be aware of?
 If yes, please explain: _____
- Yes No 6. Do you have any experience that you think would be useful to us?

- Yes No 7. Are there any jobs you would be unwilling to perform?

- Yes No 8. Would you be willing to foster an animal? If yes, what kind? _____

Areas of Volunteer Interest

Please let us know what your current and future interests area:

- | | |
|----------------------------------|--------------------------|
| _____ Clerical | _____ Adoption Counselor |
| _____ Special Events/Fundraising | _____ Foster Care |
| _____ Shelter Assistants | _____ Dog Walking |
| _____ Dog Training | _____ Cat Socializer |

Please check days and times you prefer:

Shift Times	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
7:45a -12:00p							
2:00 – 4:00 pm							
3:30-5:30 pm							

How many hours per week do you have available to volunteer? _____

Comments: _____

I give my permission to Country Acres Rescue to verify the above information. I understand this application does not guarantee acceptance to the CAR volunteer program.

Signature _____ Date _____

If under 18, signature of parent/guardian _____ Date _____