



PALS Volunteer Application

Name: _____

Address: _____

City _____ State _____ Zip _____

Home phone: _____ Cell phone: _____

E-Mail Address: _____

Birthdate _____ DriversLic.#/SS# _____

Emergency Contact Name: _____

Phone: _____

Any Physical limitations we need to be aware

of: _____

Why are you interested in becoming a PALS Volunteer:

Describe any previous work with

animals: _____

List any present or previous volunteer

jobs: _____

Current

Employer/School: _____

All of the above information is true:

Signature _____ Date _____

Application Accepted by: (PALS

OFFICER) _____ Date _____