



Concern for Animals

1414 State Ave NE Olympia, WA 98506
(360) 456-8176
concernforanimals.org

Volunteer Application

Applicant Information	
First Name:	Last Name:
Phone:	Email:
Address:	

Areas of Interest (check all that apply)			
Reception/phone <input type="checkbox"/>	Community events <input type="checkbox"/>	Housekeeping <input type="checkbox"/>	Data entry <input type="checkbox"/>
Fundraising <input type="checkbox"/>	Landscaping <input type="checkbox"/>	Pet food bank <input type="checkbox"/>	Grant writing <input type="checkbox"/>
Photographer <input type="checkbox"/>	Animal care <input type="checkbox"/>		
(Please note that Concern for Animals is not a rescue or sanctuary, animal care is limited to the cats in our very small adoption program therefore there is not a great need for volunteers in this area).			

Availability (check all that apply)						
Monday: AM <input type="checkbox"/> PM <input type="checkbox"/>	Tuesday: AM <input type="checkbox"/> PM <input type="checkbox"/>	Wednesday: AM <input type="checkbox"/> PM <input type="checkbox"/>	Thursday: AM <input type="checkbox"/> PM <input type="checkbox"/>	Friday: AM <input type="checkbox"/> PM <input type="checkbox"/>	Saturday: AM <input type="checkbox"/> PM <input type="checkbox"/>	Sunday: AM <input type="checkbox"/> PM <input type="checkbox"/>
*office is typically closed on the weekends						

Experience, Applicable Skills or Knowledge

Emergency Contact Information	
First Name:	Last Name:
Phone:	Email:
Address:	



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Agreement and Signature

It is the policy of this organization to provide equal access and opportunity to anyone who qualifies, regardless of sex, race, age, color, religion, mental or physical disability, national origin, sexual orientation, gender identity and expression and/or military status.

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations on this application may result in my immediate dismissal. I release Concern for Animals from any liability for injury or damage to personal property. I understand that if I am under the age of 18, I am required to have my parent or guardian's permission indicated by their signature below, and may be limited to specific volunteer duties & times.

Signature:

Date:

Parent or Guardian Signature:

Date:

Return/Submission Information

Thank you for your interest in volunteering with Concern for Animals. A background check will be conducted for all volunteers. Please send the completed application to: opc.cfa@gmail.com or mail to: 1414 State Ave NE, Olympia, WA 98506