



A Small Rescue Organization With A Big Heart For The "Fancy Feline" Breeds

VOLUNTEER APPLICATION

Contact Information

Name _____
Street Address _____
City ST ZIP Code _____
Home Phone _____
Cell Phone _____
Work Phone _____
E-Mail Address _____

Availability

How long of a commitment are you willing to make as a volunteer with FFRS? _____

During which hours are you available for volunteer assignments?

- | | |
|---|---|
| <input type="checkbox"/> Weekday mornings | <input type="checkbox"/> Weekend mornings |
| <input type="checkbox"/> Weekday afternoons | <input type="checkbox"/> Weekend afternoons |
| <input type="checkbox"/> Weekday evenings | <input type="checkbox"/> Weekend evenings |

Interests

Tell us in which areas you are interested in volunteering.

- Administration
- Fostering
- Care Giver (includes cleaning, feeding, watering)
- Adoption Counselor
- Events
- Fundraising
- Transport
- Phone bank
- Media/Photography

Special Skills or Qualifications

Summarize special skills and qualifications you have acquired from employment, previous volunteer work, or through other activities, including hobbies or sports.

Previous Volunteer Experience

Summarize your previous volunteer experience.

Two References (Not Related):

Name: _____ E-mail: _____ Phone: () _____
Name: _____ E-mail: _____ Phone: () _____

Person to Notify in Case of Emergency

Name	_____
Street Address	_____
City ST ZIP Code	_____
Home Phone	_____
Work Phone	_____
E-Mail Address	_____

How did you hear about us?

Agreement and Signature

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 made by me on this application may result in my immediate dismissal. I also understand that I will be **required** to sign an INFORMED CONSENT AND WAIVER OF LIABILITY **before** I will be allowed to volunteer at any of Fancy Feline Rescue of the South's physical locations.

Name (printed)	_____
Signature	_____
Signature of Parent (if under age 18)	_____
Date	_____

Our Policy

It is the policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability.

Thank you for completing this application form and for your interest in volunteering with us.

Please sign and date this form and return it by fax, e-mail, or U.S. mail to:

**Fancy Feline Rescue of the South, Inc.
1311 Echo Mill Court
Powder Springs, GA 30127
Fax: 770-439-2292**