

Flin Flon/ Creighton & Area SPCA Volunteer Application

Date: _____

First Name: _____ Middle Initial: _____ Last Name: _____

Address: _____

City: _____ Province: _____ Zip Code: _____

Phone Number (h): _____ (c): _____ Male ___ Female ___

Birthday Date: _____ Email: _____

(You must be 16 years of age to volunteer or you must be accompanied by an Adult)

Which of the following areas are you interested in working in:

Cat Cleaner/Cuddler ___ Dog Walker ___ Events ___ Teaching/Education ___

Grounds/maintenance ___ Fundraising work ___ Laundry/dishes ___ Other _____

Hours Available (please be specific)

Monday-Closed Tuesday ___ Wednesday ___ Thursday ___ Friday ___

Saturday ___ Sunday-Closed

Do you have animal experience? If yes, please give details.

Are you a Student Yes ___ No ___

If yes, what school do you attend? _____

Please list any special skills you have that would be an asset to the Flin Flon & Area SPCA?

Reference (Cannot be family) Name: _____

Address: _____ Phone Number: _____

*****Please note volunteers are subject to a background check*****

Are you volunteering to fulfill a graduation service learning requirement? Yes ___ No ___

If Yes, how many hours? _____

Are you volunteering to fulfill a court-ordered community service requirement? Yes ___ no ___

We ask that volunteers commit to 6 months of volunteering or 40 hours of volunteer work.

We are dependent on your volunteers to exercise and socialize, clean and care for our animals. Without your help, we would not be able to enrich our shelter animal's lives to the fullest while they are in our care.

Applicant's Signature _____

Date: _____

Proof of a TETANUS Vaccination is required for all volunteers that are working with animals!*

Proper footwear when walking dogs is mandatory! Example: no flip-flops

Thank You!

