



# VOLUNTEER APPLICATION

Name:

Address

Phone Number:

Cell:

Email

Profession

Other Rescue or Advocacy Groups/Affiliations

Dog's Names (please include all dogs regardless of breed)

**ALL PETS MUST BE LICENSED (IF WITHIN CITY LIMITS), SPAYED/NEUTERED, MICROCHIPPED, AND VACCINATED**

Please provide a copy of each pet's current city license certificate. Please refer to Albuquerque's HEART ordinance.

1. License # Age:

2. License # Age:

3. License # Age:

4. License # Age:

Any experience we should know about involving rescues, vet experience, and personal experience. What attracts you to the Babes and Bullies Organization/why are you interested in volunteering?

Interest in Fostering?

Availability for volunteer hours/potential days:

*Please note minimum of 4hrs /month required and 8hrs /month to be considered for annual calendar*

Please submit volunteer application to [babesandbulliesv@gmail.com](mailto:babesandbulliesv@gmail.com)