Revised 02.15.2022

CAT ACTION TEAM
Supporting cats in central Virginia

VOLUNTEER APPLICATION

(Adult Volunteers)

Thank you for your interest in volunteering with Cat Action Team!

Please complete this form, sign, and return to CAT. We will not share your information with any other organization.

Personal Information

❑ (Optional) I am completing this application on behalf of a service group, club, or organization.
Name of group, club, or organization: _____

❑ (Required) I hereby certify that neither I nor anyone in my household have never been charged with or convicted of animal cruelty, neglect, or abandonment.

Applicant Name: _____

Applicant Address: _____

_____

Applicant Phone # (Primary): _____ Phone # (Secondary): _____

Applicant E-mail: _____

Applicant Occupation: _____ Employer: _____

Emergency Contact Name: _____ Phone: _____

Email: _____

Volunteer Survey

1. Please check the volunteer roles you are interested in. We will train you!

❑ Pet food drives & tabling	❑ Fostering	❑ Printing/posting flyers
❑ Trapping (TNVR)	❑ Marketing & graphic design	❑ Strategic planning
❑ Volunteer management	❑ Photography	❑ Fundraising or grant writing
❑ Article/newsletter writing	❑ Data entry	❑ Website & social media
❑ Transporting (cats, supplies, traps, medicine, food, etc.)	❑ Other: What are your ideas?	

2. Tell us about your past volunteer experience, particularly if it's cat-related:

_____

_____

_____

3. What is your typical availability/capacity for volunteering? (Days of the week, time of day, hours per week, etc.)

_____

By signing this application, I hereby certify that the information provided in this application is true and accurate.

_____ _____ _____

Print Name **Signature** **Date**

Cat Action Team
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