Tiplings Volunteer Form

Name **Phone** _____

Address _____

City/State/Zip _____

Email _____

Date of Birth _____

Areas of Interest

☐ **Foster**

☐ Bottle Babies ☐ Weaned ☐ Special Needs

☐ Mama & Babies ☐ Adults Details: _____

☐ **PetSmart Adoption Center Cleaner**

Insert Preferred **Shift 1** _____Insert Preferred **Shift 2** _____

Other Shift Availability _____

Minimum commitment = 2 shifts per month for 3 months

Shifts: 7-9am and 7-9pm Monday to Saturday. 10-12 and 5-7pm on Sunday

☐ **Adoption Event Support** ☐ PetSmart, Wednesdays 6 to 8pm ☐ PetSmart, Saturdays, 1 to 4pm

☐ **Transport** ☐ **Pictures** ☐ **Other**

☐ **Social Media** ☐ **Events** Details: _____

Waiver of Liability

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Administration:

Date	Item	Comment

Tiplings Volunteer Form

Name **Phone** _____

Address _____

City/State/Zip _____

Email _____

Date of Birth _____

Areas of Interest

☐ **Foster**

☐ Bottle Babies ☐ Weaned ☐ Special Needs

☐ Mama & Babies ☐ Adults Details: _____

☐ **PetSmart Adoption Center Cleaner**

Insert Preferred **Shift 1** _____Insert Preferred **Shift 2** _____

Other Shift Availability _____

Minimum commitment = 2 shifts per month for 3 months

Shifts: 7-9am and 7-9pm Monday to Saturday. 10-12 and 5-7pm on Sunday

☐ **Adoption Event Support** ☐ PetSmart, Wednesdays 6 to 8pm ☐ PetSmart, Saturdays, 1 to 4pm

☐ **Transport** ☐ **Pictures** ☐ **Other**

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