



*For the Love of Strays*  
*Volunteer Application*

P.O. Box 8122  
 Corpus Christi, TX 78468  
 361.462.7911  
 FortheLoveofStrays.com

**Contact Information:**

Name \_\_\_\_\_  
 Street Address \_\_\_\_\_  
 City ST ZIP Code \_\_\_\_\_  
 Home Phone (\_\_\_\_\_) \_\_\_\_\_  
 Cell Phone (\_\_\_\_\_) \_\_\_\_\_  
 E-Mail Address \_\_\_\_\_

**Interests:**

- Tell us in which areas you are interested in volunteering
- Fostering – please give me more information
  - Adoption events – Setting up/breaking down kennels, walking dogs, cleaning kennels
  - Microchip events – Setting up/breaking down tables, handling dogs
  - Newsletter/brochure production – electronic
  - Fundraising – planning, implementing, instruction, volunteering during events
  - Transporting fosters to/from the veterinarian or to/from adoption events
  - Transporting crates, tables or other items needed for events
  - Volunteer coordination – explaining tasks to new volunteers
  - Grant writing and researching other possible funding
  - Data entry – updating online information on dog log, registering microchips
  - Drop off food, medication, supplies to foster homes

**Availability:**

During which hours are you available for volunteer assignments?

	Mon	Tues	Wed	Thurs	Fri	Sat	Sun
Morning							
Afternoon							
Evening							



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**Special Skills or Qualifications**

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

**Previous Volunteer Experience**

Summarize your previous volunteer experience.

**Person to Notify in Case of Emergency**

Name \_\_\_\_\_  
Street Address \_\_\_\_\_  
City ST ZIP Code \_\_\_\_\_  
Home Phone (\_\_\_\_) \_\_\_\_\_  
Cell Phone (\_\_\_\_) \_\_\_\_\_  
E-Mail Address \_\_\_\_\_

**Agreement and Signature**

By submitting this application, I affirm that the facts set forth in it are true and complete to the best of my knowledge. 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. For the Love of Strays shall be held harmless from and against any and all claims and damages of every kind, for injury to any person or persons and for damage to or loss of property, arising out of or attributed to, directly or indirectly, the operations or performance of the above named volunteer under this agreement, including claims and damages arising in whole or part from the negligence of For the Love of Strays. I agree to notify a FTLOS member of any injuries such as illness, escapes, injuries or any concerns pertaining to my foster as soon as possible.

Name (printed) \_\_\_\_\_  
Signature \_\_\_\_\_  
Date \_\_\_\_\_



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**PERSONAL REFERENCES (No more than 1 family member)**

Reference 1

Name \_\_\_\_\_ Relationship \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_  
State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (\_\_\_\_\_) \_\_\_\_\_  
Email \_\_\_\_\_

Reference 2

Name \_\_\_\_\_ Relationship \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_  
State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (\_\_\_\_\_) \_\_\_\_\_  
Email \_\_\_\_\_

Reference 3

Name \_\_\_\_\_ Relationship \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_  
State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (\_\_\_\_\_) \_\_\_\_\_  
Email \_\_\_\_\_

**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.