



Tupelo Lee Humane Society Volunteer Form

Last Name _____ First Name _____

Address _____ City _____ State _____ Zip _____

Day Phone _____ Evening Phone _____ Cell Phone _____

E-mail _____

Age: (Check one) __15-18 __19-30 __31-45 __46-60 __60+

(Under age 14 must have parent or adult come with you to volunteer)

Emergency Contact & Relationship _____

Phone _____

TLHS Hours: Mon - Fri: 9 am - 5:30 PM / Sat: 9 am - 2:30 PM / Closed Sundays

Spay Clinic Hours: Mon- Fri, Normally hours are 8:30 till 3

I would like to volunteer _____ hours per week or _____ hours per month.

Please indicate which days and times you would prefer to volunteer:

Mon. _____ Tues. _____ Wed. _____

Thurs. _____ Fri. _____ Sat. _____

Other _____

Areas of interest:

Please check all that apply.

- Canine care Feline care Marketing Fundraising Photos
- PetsMart Weekends Community Events Spay Clinic Fostering
- Other (Please specify) _____

Do you have any allergies or physical conditions that might affect your volunteer work?

If so, please describe:

What experience do you have working with animals?

- I understand the possible risk of bringing home illnesses from the Shelter to personal pets or vice versa and must have current vaccinations for animals at home.
- I understand the potential safety risks of working with animals.
- I understand that all volunteer work done with TLHS is at my own risk, and hereby release Tupelo Lee Humane Society (TLHS) and its employees, agents, members, and board of directors of any and all liability.

Signature: _____