



PAWS Team VOLUNTEER application

Name: _____ Email: _____
 Phone: (home): _____ (work) _____ ext _____ (Cell): _____
 Address: _____ Zip: _____
 Birthdate: _____
 Emergency Contact (name): _____ Phone: _____
 Medical Conditions (Allergies, Asthma, Diabetes etc): _____

Tell Us About Yourself!: *(list any you feel may be helpful to your volunteering at Tabby Town)*

Occupation/Skills: _____
 Hobbies, Interests: _____
 Volunteer Experience: _____

Tell Us About Your Pets: _____

Volunteer Interests: (Check all that apply)

- | | | |
|--|---|---|
| <input type="checkbox"/> Cat Care & Socialization | <input type="checkbox"/> Adoption Assistant | <input type="checkbox"/> Cleaning of Cages |
| <input type="checkbox"/> Greeter/ Customer Service | <input type="checkbox"/> Fundraising / Events | <input type="checkbox"/> Office Work/Data Entry |
| <input type="checkbox"/> Fostering Cats or Kittens | <input type="checkbox"/> Transport to Shelter | <input type="checkbox"/> Store Retail/Marketing |

What made you choose Tabby Town?: _____

Hours Available/Flexible Shifts: Mon/Tues/Thurs/Fri/Sat 12:00 to 4:00pm; 4:00 to 8:00 pm
 Wed & Sun 12:00 to 5:00 pm (Note: *Tidy Cat Cleaning* shifts 9:30 to 11am)

	<u>Morning</u>	<u>Afternoon</u>	<u>Evening</u>
__ Monday	Time: -	Time: -	Time: -
__ Tuesday	Time: -	Time: -	Time: -
__ Wednesday	Time: -	Time: -	Time: -
__ Thursday	Time: -	Time: -	Time: -
__ Friday	Time: -	Time: -	Time: -
__ Saturday	Time: -	Time: -	Time: -
__ Sunday	Time: -	Time: -	Time: -

Comments: _____

How did you hear about Tabby Town?

Friend, family/volunteer (name) _____ Agency (name): _____
 School Assignment (school name) _____ Other: _____

Please list 1 personal reference

Name: _____ Phone: _____ Relationship: _____

Do You Like Cats?! _____ They *purringly* thank you for your time.



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This agreement is intended to indicate the seriousness with which we treat our volunteers. The intent of the agreement is to assure both our deep appreciation of your service and to indicate our commitment to do the very best we can to make your volunteer experience at Tabby Town a productive and rewarding one.

Tabby Town

We, Tabby Town, agree to accept your services and commit to the following:

1. To provide adequate information, training and assistance for the volunteer to be able to meet the responsibilities of their position.
2. To ensure diligent supervisory aid to the volunteer and to provide feedback on performance.
3. To respect the skills and individual needs of the volunteer, and do our best to adjust to these individual requirements where ever possible.
4. To be receptive to any comments or concerns from the volunteer regarding ways in which we might mutually better accomplish our respective tasks.

Paws Team Volunteer

As a paws team volunteer @ Tabby Town, I agree to the following:

1. To lovingly care for, respect and attend to the needs of the rescued cats & kittens of Tabby Town.
2. To be respectful and courteous to all visitors and customers while visiting the store.
3. To perform any assigned duties to the best of my abilities.
4. To adhere to Tabby Town guidelines and procedures.
5. To meet time and duty commitments, or to provide adequate notice for alternate arrangements.
6. To accept guidance from assigned Paws Team Leaders.
7. To immediately bring attention to any restrictions regarding personal health issues or inability to perform a particular task when requested.

If you're unable make your shift, please just give us a call at 822.4910.

Agreed to:

Volunteer Signature: _____

Date: _____

Legal Guardian or Advocate: _____

Date: _____

(required under 18 yrs of age)

TLC Manager: _____

Date: _____

Title: _____

Tabby Town is located at the McKinley Mall
3701 McKinley Parkway, Suite 504, Blasdell, NY 14219
716.822.4910

e-mail Cheryl@tabbytown.org with any questions, comments or suggestions.