

LINCOLN COUNTY HUMANE SOCIETY
Inside Volunteer Application

All Inside Volunteers must be 16 years of age to apply.

Name: _____ Date of Birth: _____ Age: _____
Address: _____ Phone Number: _____
City: _____ Cell #: _____
Email Address: _____

Please provide a valid, legible email address. Email is the coordinator's primary form of contact. If you do not have an email address or internet access, please indicate so.

Emergency Contact: _____ Phone Number: _____

While precautions have been taken for our volunteers – individuals volunteer at their own risk.

Please list related experience: _____

Do you have physical limitations? If yes, please explain: _____

Have you already attended an inside volunteer orientation: No Yes When: _____

Are you able to start volunteering now or a future date: Now Future When: _____

Are you able to volunteer during the holidays? No Yes

If in school, how many volunteer hours do you need: _____ School Name: _____

Note: If or when you are no longer interested in volunteering with us, please notify the volunteer coordinator by email so that we can remove you from our active volunteer list.

- _____ A
 - _____ I
- ll Inside Volunteer applicants must provide a resume and references with their application.
- inside Volunteer Orientations take place once a month. All applicants must attend an orientation session. When your orientation is complete, you may begin your volunteer

The Lincoln County Humane Society thanks each applicant for their interest in LCHS and with helping the animals.

By signing, you, the applicant, agree that the above information is correct to the best of your knowledge.

Volunteer Applicant's Signature: _____ Date: _____

Office Use Only
Attended Orientation <input type="checkbox"/> No <input type="checkbox"/> Yes
Notes: _____

