



**Paradise Animal Shelter**  
925 American Way, Paradise, CA 95969  
Open 11:00-3:00 on Thursday, Friday and Saturday  
(530) 872-6275

**THIS INFORMATION IS KEPT STRICTLY CONFIDENTIAL! PLEASE PRINT LEGIBLY!**

**PASH (Paradise Animal Shelter Helpers) Volunteer Application Form:**

Your Name: \_\_\_\_\_ Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Cell #: \_\_\_\_\_  
E-Mail Address: \_\_\_\_\_  
Work Number: \_\_\_\_\_

**In case of an emergency, who do you want contacted:**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Relationship to you: \_\_\_\_\_

**Physician Information:**

Your Physician: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_

**How did you hear about the volunteer program at the shelter?**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**(Please complete the reverse side also)**

**Tell us about any training, skills or experience you have in working in a shelter setting or other animal-related fields:**

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**Please indicate the below area(s) of interest:**

- Dogs Only  
 Cats Only  
 Dogs and Cats  
 Yard Support  
 General Handyman  
 Bathing/Grooming Animals  
 Kennel Assistant (Additional information can be provided)  
 Foster Program (Additional information can be provided)  
 Community Outreach (Additional information can be provided)  
 Speaking to local groups about our PASH volunteer program (Approval required)  
 Other: \_\_\_\_\_  
\_\_\_\_\_

**I certify that the above information is true, to the best of my knowledge**

Volunteer's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent Signature or  
Legal Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

(If you are not 18 years or older you must have a parent or legal guardian sign above for you also.)

**For Office Staff Use Only:**

Orientation Completed: \_\_\_\_\_

Orientation Team Leader: \_\_\_\_\_

Volunteer Signature: \_\_\_\_\_

Manual Received: \_\_\_\_\_

Fostering Only:  Dogs, Cats or Both

Community Outreach Only: \_\_\_\_\_