** Rancho Coastal Humane Society Thrift Shop**

 **Volunteer Application
 120 Aberdeen Drive, Cardiff 92007
 760-753-0970**

 **ThriftShop@RCHumaneSociety.org**

Today’s Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

First Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 18 years or older? \_\_\_\_\_\_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are you currently working? \_\_\_\_\_ Where?

What, if any, pets do you have and what are their name(s)?

Do you have any areas of expertise or background you feel might be helpful?

If you have volunteered previously where and when?

What did you do there?

What did you enjoy most about volunteering there?

At this time, how much time do you feel you can commit to RCHS Thrift Shop?

What day(s) of the week would you like to commit to?

Please list any physical concerns you would like to bring to our attention.

Anything else you would like us to know?

Many thanks for applying to our Volunteer Program. Shortly after this application is submitted, you will be contacted by the Volunteer Liaison to discuss Shop opportunities.

Rev. date: 4.26.17