

VOLUNTEER APPLICATION

Data

Date:	
Name:	D.O.B:
Address:	Email:
City/State/Zip:	Phone:
Emergency Contact:	
Name of Doctor:	
	LUNTEER ACTIVITIES e activities that are of interest to you:
Walking dogs	Dog Enrichment
Cat Socialization	Repair Work
Photography	Special Events
Other paw-esome things we nee	d to know about you:

Please return or mail completed application to:

Grand Strand Humane Society, 3241 Mr. Joe White Ave., Myrtle Beach, SC 29577 Fax to: 843-445-2821

OR

Email to volunteer coordinator: volunteergshs@gmail.com
From everyone here at the Grand Strand Humane Society, we thank you for volunteering. Your application will be reviewed by our volunteer coordinator and you will be contacted directly for further training. We look forward to seeing you!!