

# Whistler Animals Galore Society-Volunteer Application

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Date of Application: \_\_\_\_\_

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

Gender: \_\_\_\_\_ Date of Birth (Month/Day/Year): \_\_\_\_\_

Physical Address (Street #, Street Name, Unit #):  
\_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Mailing Address:  
\_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone Numbers: Please put a check next to which number is the best to reach you at.

(Home) \_\_\_\_\_  (Cell) \_\_\_\_\_

(Work) \_\_\_\_\_  (Other) \_\_\_\_\_

Email Address: (Please print as clearly as you possibly can, as it can sometimes be very difficult to read, this is the email address where you will receive volunteer information)  
\_\_\_\_\_

ID Type (Driver's Licence/Passport): \_\_\_\_\_

ID Number: \_\_\_\_\_

Issuing Province & Country: \_\_\_\_\_

Do you give consent to a criminal record check: Y / N

Emergency Contact Details:

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

Relationship to you: \_\_\_\_\_

Phone Numbers: Please put a check next to which number is the best to reach your emergency contact at.

(Home) \_\_\_\_\_  (Cell) \_\_\_\_\_

(Work) \_\_\_\_\_  (Other) \_\_\_\_\_

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How long do you plan to be living in Whistler? \_\_\_\_\_

Where do you work currently? \_\_\_\_\_

Do you have any allergies or major health conditions? \_\_\_\_\_

How did you find out about WAG's volunteer program?

Newspaper  Friend  Other: \_\_\_\_\_

Do you have pets of your own? \_\_\_\_\_

What are your hobbies? \_\_\_\_\_

Why did you want to become a volunteer at WAG? \_\_\_\_\_

Can you commit to a minimum of 2 hours a week for at least 4 months?  Yes  No

If you are available all days and times, please check here:

If not, please circle which days you are available below and write in what times on those days:

Sunday: Times (Between 8 AM & 8 PM): \_\_\_\_\_

Monday: Times (Between 8 AM & 8 PM): \_\_\_\_\_

Tuesday: Times (Between 8 AM & 8 PM): \_\_\_\_\_

Wednesday: Times (Between 8 AM & 8 PM): \_\_\_\_\_

Thursday: Times (Between 8 AM & 8 PM): \_\_\_\_\_

Friday: Times (Between 8 AM & 8 PM): \_\_\_\_\_

Saturday: Times (Between 8 AM & 8 PM): \_\_\_\_\_

Do you have any special skills or experience you believe you can contribute that may be useful to WAG (E.G.: dog training, fundraising/event organization, marketing/PR, legal, construction, computer work, photography, veterinary experience, etc.)

Do you have?  4X4  Cargo or Passenger Van  Pickup Truck  FOODSAFE  Serving It Right

Do you live in pet friendly accommodation? If so, would you be willing to foster an animal if needed?

Do you have a vehicle? If so, what type is it? \_\_\_\_\_

Would you be interested in helping us transport animals to the vet for vet appointments?

Would you be interested in helping us with events/fundraisers?

Please indicate how you are interested in helping WAG:

Opening Assistant  Closing Attendant  Advanced Cat Enrichment Attendant  Advanced Dog Walking Attendant  Advanced Dog Enrichment Attendant  Fundraising Events  Transport to Vet Appointments

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**Volunteers must be 19 years of age or over. Volunteers are required to attend an orientation session, sign a Volunteer Agreement plus a Release and Waiver of Liability Form, and complete a training session. By signing below, I certify that I am 19 years of age or older, the information I have provided is correct and I have never been convicted of a crime under the Animal Cruelty section of the criminal code or any other animal cruelty legislation.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Received by: \_\_\_\_\_ Date: \_\_\_\_\_