



Berkshire Humane Society Volunteer Application

214 Barker Road Pittsfield, MA 01201
301 Stockbridge Road, Great Barrington, MA 01238

Terry Bissaillon, Volunteer Coordinator
Phone: 413-447-7878 Ext. 37
Email: tbissaillon@berkshirehumane.org

*We fill your request to become a volunteer at BHS as soon as possible. Please realize certain positions may not be open at the time when you apply. Applications are kept on file for a year.
Feel free to email or call with questions.
Thank you for your application!*

Please fill in the information requested below:

Full Name: _____ DOB: _____
 Address: _____ Home Ph: _____
 City, State, Zip: _____ Cell Ph: _____
 Email: _____

Emergency Contact: _____ Relationship: _____ Phone: _____

Junior Volunteers ages 12-16 must be accompanied by an adult who accepts total responsibility.

Name	Age	Relationship to Volunteer
------	-----	---------------------------

Which of these activities and times you are interested in?

▲ Volunteers in our Foster Program and Education Department complete an additional form.

- Cats Dogs Small Animals Reception Maintenance/Janitorial
 Humane Education▲ Baking Lawn/Garden care Fundraising Events
 Foster Program▲ Mailing Animal Transport Marketing / Publicity

Monday _____	Friday _____
Tuesday _____	Saturday _____
Wednesday _____	Sunday _____
Thursday _____	(available hours are 8AM - 5PM*)

*Time slots are specific to each location

Is there something you would like to do that isn't listed above? _____

*****Please turn the page over to complete the rest of the application*****

Getting to Know You Even Better!

Please tell us why you are interested in volunteering with the Berkshire Humane Society?

- Is this to fulfill a project or community service? Yes _____ No _____
If yes, please describe

- Do you have previous volunteer experience? Yes _____ No _____
If yes, please describe

- Do you have any special interests or hobbies? _____

- Is there anything that you cannot or prefer not to do? Yes _____ No _____
If yes, please describe

- Do you have any allergies, disabilities, or other limitations that may affect volunteering with us?

I give the Berkshire Humane Society permission to verify any and all of the information on this application. I have honestly and completely filled out this application to the best of my knowledge.

(Your printed first & last name)

(Your signature)

(Today's Date)