Denver Samoyed Rescue
Application to Volunteer

To help us get to know you a little better and decide where you might best help us, please complete the following. Please be thorough as incomplete applications will not be considered. If you have any questions, please feel free to contact a DSR worker.

*Required field

Name* _____   Date _____

Address* _____ City* _____ State _____ Zip+4 _____

Telephone Number(s) *   Home _____ Work _____ Cell _____

E-Mail Address: _____ Best way to contact you: _____

Who is your employer? * _____

Occupation: _____

What type of area do you live in?   ☐City   ☐Suburb   ☐Rural

What dogs/pets have you previously owned? _____
_____

Why are they no longer living with you? _____

Please list all other animals currently living in your home including what species are they, what age, and what sex?
_____
_____

How have you educated yourself about Samoyeds? * _____
_____

How did you hear about Denver Samoyed Rescue and who referred you to us? * _____
_____

Vet or other reference (name, phone, relationship* _____

What areas are you interested in helping with? *   ☐Foster   ☐Transport — ☐Local ☐Distance   ☐Events
☐Walking dogs   ☐Grooming dogs   ☐Thank you notes   ☐Soliciting donations   ☐Other (explain)

What special skills do you have that could enhance DSR's efforts? _____
_____

In the space below, please tell us a little about yourself and why you wish to volunteer for DSR?
_____
_____
_____
_____
_____

Thank you for taking your time to complete this application. By signing below, you attest to the truthfulness of your answers.

_____   _____   _____   _____
Applicant Signature   Date   Applicant Signature   Date

Return completed application via one of the following methods:

U.S. Mail: Denver Samoyed Rescue   **E-mail**:   samoyedrescue@msn.com
                   PO Box 134
                   Lafayette, CO 80026-0134   **Fax:**   (720) 381-6808

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(Do not write below this line)

Accepted: _____ Interviewer: _____ Date: _____

Rejected: _____ Reason: _____

_____

Comments: