

# LONGMONT FRIENDS OF FERAL & ABANDONED CATS VOLUNTEER APPLICATION

*Please fill in all blanks completely and clearly. Thanks!*

Date \_\_\_\_\_

\*Name \_\_\_\_\_ \*Email address \_\_\_\_\_

\*Home/Cell Phone: (please indicate which one) \_\_\_\_\_

\*Contact Preference: Phone \_\_\_\_\_ Email \_\_\_\_\_

\*Home Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

\*Occupation \_\_\_\_\_ Work Phone \_\_\_\_\_

\*Employer \_\_\_\_\_ City \_\_\_\_\_

\*Emergency Contact Name \_\_\_\_\_ Phone \_\_\_\_\_

## Volunteer Opportunities

*Please check any volunteer activities that interest you.*

### Colony Cats:

- Feed once a week (mornings) \_\_\_\_\_
- Substitute feeder – fill in for full-time feeders as needed

### TNVR:

- Trapping feral cats (usually mornings and evenings) \_\_\_\_\_
- Transport feral cats to clinics or back home \_\_\_\_\_
- Take care of feral cats in traps night before surgery at your home \_\_\_\_\_
- Recover feral cats in traps post-op one to two nights at your home \_\_\_\_\_

### Foster Cats:

- Cats in enclosures who need medical care or need post op medical care \_\_\_\_\_
- Bottle feed and care for small kittens \_\_\_\_\_
- Care for kittens who are under 8 weeks old who need time to grow before adoption \_\_\_\_\_
- Socialize under socialized kittens who need taming (training provided) \_\_\_\_\_

### At LFFAC Facility:

- Provide care for cats and kittens (feed, visit, light room cleaning) \_\_\_\_\_
- Socialize feral kittens (advanced training provided) \_\_\_\_\_
- Monthly deep cleaning \_\_\_\_\_
- Transport cats/kittens to and from facility to vet clinics \_\_\_\_\_
- Outdoor yard maintenance (mow, weed) \_\_\_\_\_
- Donated food pick up \_\_\_\_\_

**Education:**

- Help develop educational materials for public \_\_\_\_
- Help prepare presentations \_\_\_\_
- Help design and set up LFFAC displays in public places \_\_\_\_

**Public Events:**

- Help plan fundraising and educational events \_\_\_\_
- Host education tables with other volunteers \_\_\_\_
- Public speaking \_\_\_\_

**Administrative:**

Office Work \_\_\_\_ Grant Writing \_\_\_\_ Graphic Arts \_\_\_\_ Website/Computer \_\_\_\_  
 Social Media \_\_\_\_ Photography/Video \_\_\_\_ Writing/Journalism \_\_\_\_ Marketing \_\_\_\_

How did you hear about LFFAC? \_\_\_\_\_

Please describe your experience with animals. \_\_\_\_\_

Describe any current or previous volunteer experiences. \_\_\_\_\_

How often are you interested in volunteering? \_\_\_\_\_

Are you bilingual (Spanish/English), and if yes, would you be willing to help us translate our literature into Spanish and communicate with Spanish speaking residents who need our help? \_\_\_\_\_

**Availability to volunteer:**

Weekdays \_\_\_\_ Mornings \_\_\_\_ Afternoon \_\_\_\_ Evenings \_\_\_\_  
 Weekends \_\_\_\_ Mornings \_\_\_\_ Afternoon \_\_\_\_ Evenings \_\_\_\_

**Please return the completed application to:**

LFFAC, P.O. Box 2205, Longmont, Colorado 80502 or send to [info@longmontfriendsofcats.org](mailto:info@longmontfriendsofcats.org)

For questions call 303-257-3706

Thank You. We will be in touch soon!

	For LFFAC Use Only	
Attended Volunteer Orientation _____		Waiver Signed _____