

FCAP Volunteer Information Sheet

Today's date: ____/____/____

Name: _____ Address (city, state, zip): _____

Phone: _____ E-mail: _____

Please circle the volunteer areas that interest you!

- | | | | |
|----------------------|-----------------------|----------------------|----------------------|
| <i>Foster parent</i> | <i>Baby-sitter</i> | <i>Bottle feeder</i> | <i>Cage cleaning</i> |
| <i>Cat trapping</i> | <i>Spay Day</i> | <i>Fund raising</i> | <i>Marketing</i> |
| <i>Voice Line</i> | <i>Web site input</i> | <i>Grant writing</i> | <i>Newsletter</i> |

Do you currently volunteer with any other non-profit animal welfare group? _____

Which animal welfare group? _____

Do you have pet cats? _____ Are they (please circle) indoor only, indoor/outdoor, or outdoor only?

Do you have experience in veterinary medicine, media relations, marketing, writing, graphic art, accounting or law? If so, please describe that experience.

Thank you for your interest in volunteering for FCAP!