



A Place To Call Home, Inc. Parrot Rescue and Adoption



114 N Main St, Creston, IL 60113 (815) 384-3170

Volunteer Application

Date: _____

Volunteer Candidate Basic Information

Name _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____

E-mail _____ Fax: _____

Are you 18 years of age or older? Y N

Volunteer Candidate Specific Information

When are you able to volunteer? (Check all that apply)

| | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday | Sunday |
|------------------------|--------|---------|-----------|----------|--------|----------|--------|
| Morning (8AM-1PM) | | | | | | | |
| Afternoon (1PM-6PM) | | | | | | | |

| Physical Conditions | Describe |
|-----------------------|----------|
| Allergies | |
| Medical Conditions | |
| Physical Restrictions | |
| Date of last Tetanus | |

| In Case of Emergency Contact | |
|------------------------------|----------------------------|
| Name | |
| Address | |
| City / State / Zip | |
| Phone Numbers | H: _____ C: _____ W: _____ |



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How often would you be available to volunteer? Once a week Twice a week Every other week Other

Would you be available on-call for emergencies Y N

Would you be available to transport birds and/or cages Y N

Do you own a: Pick-up / Van / SUV / Other vehicle useful for moving big things around (circle all that apply)

Are you interested in volunteering in other areas besides Direct Bird Care? Y N

If yes, what areas interest you? (Please circle all that apply)

Education/Outreach Fundraising/Special Events Media/PR Foster Care Toy making

Administration/Bookkeeping Website OTHER: Please specify: _____

Do you have previous experience with any rescue group or animal shelter?

How did you learn about us? _____

Why do you want to volunteer? _____

What skills do you possess that might be an asset to our rescue? _____



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Do you have pets in your home or have you in the past? Y N

If yes, what species and how many?

- | | |
|----------|----------|
| 1) _____ | 2) _____ |
| 3) _____ | 4) _____ |
| 5) _____ | 6) _____ |

What experience do you have working with animals and/or birds?

Are you or have you ever been a breeder of birds or other animals? Yes No If yes, please explain:

All APTCH Volunteers are encouraged to attend a Basic Bird Care Class (offered frequently at APTCH) either before starting as a volunteer or shortly thereafter. Volunteers are expected to be exceptionally reliable, responsible, and committed. We require a six (6) month minimum commitment.

Will you be able to meet these requirements? Yes No If no, please explain:



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To protect the well-being of our birds as well as your pets at home, you must:

1. Have your birds tested for diseases by an avian vet and share the results with us
2. Take a shower and wear clothes that are clean and untouched by your birds before coming into contact with the resident birds of APTCH.
3. Upon arriving to your home after volunteer work, immediately change your clothes and take a shower before handling your birds.

Will you comply with these guidelines? Y N

I hereby certify that the information I have provided above is truthful and complete and that I have never been charged with or convicted of animal abuse or neglect in Illinois or in any other state, province, municipality, foreign nation or while in the military.

Print Name _____

Signature _____ Date _____

If volunteer is under the age of 18, we require the signature of a parent or guardian:

Signature _____ Date _____

Relationship to volunteer _____