



CRESTON PET ADOPTION AND WELFARE SOCIETY

2805 Lower Wynndel Road

Creston, B. C. V0B 1G8

Phone: 250-428-7297

Email: paws@kootenay.com

Website: www.paws-crestonbc.org

MEMBERSHIP

The annual fee for P.A.W.S. membership is \$15.00 per person or \$25.00 per family, payable within one month of the Annual General Meeting.

This is an Individual Family membership.

Name(s): _____ Date: _____

Telephone: _____ Email: _____

Residential Address: _____
(and postal code) _____

Mailing Address and postal code: _____
(if different from residential address) _____

Emergency contact phone number: _____

Age: Under 18 _____ 18-30 _____ 30-50 _____ 50 + _____

Would you like to be an active P.A.W.S. Volunteer? Yes No

If YES, please complete a **VOLUNTEER INFORMATION form**

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PAWS Director only:

DUES (per year – per family):

Amount Rct. # Date Paid Initials

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Director Signature

Position

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PAWS does not want to put anyone with health problems at risk. Please list any allergies or medical conditions _____

In case of a health emergency PAWS should _____

Following are areas in which you can help PAWS. Please indicate your interests.

Foster-Care: Please complete a **Foster Care Agreement**

Dog - Large Medium Small Female with pups Neo-natal Orphan

Cat , Female with kittens Neo-natal Orphan

Other – please specify _____

Grant Search and Applications _____

Fundraising: - Bake Sales , Bake Tend Table
- Raffles , Sell tickets Design tickets, posters
- Main Annual Fundraiser , Posters & Advertising Ticket Sales
Setup/decorating After-event Cleanup
- Other fundraising ideas? – (please specify) _____

Office Work (filing, telephone, adoption packages, record keeping, computer entries, etc.)

- What day(s) of the week are you available? _____

- Hours? _____

Shelter Work - Indoor maintenance , Grounds maintenance ,
Cat care , Dog care , Other animal care ,
Animal transport (vet runs, groomer, etc.) ,
Errands (feed store, supplies, recycling, etc.)

- What day(s) of the week are you available? _____
- Hours? _____

Animal care: Dog walking , Animal (dog, cat, other) socializing , Grooming ,

- What day(s) of the week are you available? _____
- Hours? _____

Shelter Animal Photographs , Distributing Posters and Flyers

Seniors for Seniors program co-ordination (matching senior shelter animals with senior community members)

Present PAWS Education and/or Therapy Pet program in local schools and community groups

- Do you have a Certified Therapy Pet? Yes No

Obedience training (working under guidance of PAWS trainer)

Do you have professional training experience? Yes No

On-call emergency animal care

Disaster/Emergency response and/or evacuation

- Can you provide animal accommodation in the event of a community emergency?

- What kind(s) of animals could you accommodate? _____
- How many? _____
- Do you have a trailer to transport a number of animals or large animals? _____
- Describe _____

Other areas you would like to help (please give brief description) _____

Anything else we should know? _____

Members/volunteers are encouraged to attend the 5 general meetings held during the year. We request that you attend the Annual General Meeting held the third Thursday in March each year.

Signature

Name - please print