

CAPE BRETON BRANCH
Nova Scotia Society for Prevention of Cruelty
Sydney, Nova Scotia

SHELTER
401 East Broadway
Sydney, NS
Phone: 539-7722

MAILING ADDRESS
P.O. Box 762
Sydney, NS
B1P 6J1

VOLUNTEER APPLICATION

NAME: _____ AGE: _____

ADDRESS:

PHONE:

EDUCATIONAL BACKGROUND: School Now Attending: _____ Grade: _
High School Graduate: _____ University: _

Please take a moment to answer the following questions:

1. Do you like animals? _____

Please state your reasons why:

2. Do you have pets at home?

3. Why do you wish to volunteer for the S.P.C.A.?

4. Please list any experience you have had or skills you possess which would help the S.P.C.A.?

5. How do you feel you can help the S.P.C.A.?

6. We regularly visit several nursing homes in the area. Would you be interested in helping us do nursing home visits? _____

We also have Senior Auxiliary which helps raise money for the shelter. If you are interested in becoming involved with this group, please ask one of our staff for information.

NAME, ADDRESS and PHONE NUMBER OF A PERSON TO BE NOTIFIED IN CASE OF AN EMERGENCY OR ACCIDENT:

Thank You for Your Interest, We Hope To See More of You in The Future!

"We speak for those who cannot speak for themselves." **You must also provide a record check with your application, they are done free of charge by the CBRM at any Police Headquarters.**