



JUNIOR VOLUNTEER — PERMISSION & RELEASE FORM

BULVERDE AREA HUMANE SOCIETY

P.O. BOX 50, BULVERDE, TEXAS 78163

830-980-2247

BAHShelter@yahoo.com

www.bulverdeareahumanesociety.com

Check one: Parent Legal Guardian

Parent / Legal Guardian Name (First, MI, Last): _____

I give permission for the following child to participate in Bulverde Area Humane Society (BAHS) activities:

Junior Volunteer Name: _____

Current Age: _____ Birthday (month/day/year): _____

Address (Street): _____

City: _____ State: _____ Zip: _____

Daytime Phone #: _____ Email Address: _____

Emergency Phone #: _____ Relationship: _____

Do you own or have experience with dogs and/or cats? Yes No

Why do you want to volunteer? _____

Where would you like to volunteer? _____

How did you learn about BAHS? _____

