

**LC-ARF!**  
**Volunteer Intake Form**

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone Numbers \_\_\_\_\_

Email Address \_\_\_\_\_

I am willing to help with the following:

- Light clerical work
  - Preparing and serving food
  - Phone calls to volunteers, donors
  - Helping to organize or work at events
  - Addressing and stuffing envelopes
  - Using social media
  - Helping with spay/neuter clinics
  - Other
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Special Skills \_\_\_\_\_

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Mail to:                      LC-ARF!  
                                    P.O. Box 8514  
                                    New Castle, PA 16107