



PAW·A·THON™

& Pet Resource Fair

VOLUNTEER FORM

NAME:

COMPANY/ORGANIZATION:

(if applicable)

ADDRESS:

TELEPHONE:

EMAIL:

PETS:

Yes No Cat Dog Rabbit Horse Fish Other _____

NAME & DESC:

1.

2.

3.

4.

INTEREST/AVAILABILITY TO HELP:

- | | | | |
|----------------------------------------------|----------------------------------------------|------------------------------------------------|------------------------------------------------|
| <input type="checkbox"/> MARKETING | <input type="checkbox"/> SPONSORSHIPS | <input type="checkbox"/> COMPUTER ENTRY | <input type="checkbox"/> CHERRY FESTIVAL BOOTH |
| <input type="checkbox"/> MAILING | <input type="checkbox"/> SPEAKER ENGAGEMENTS | <input type="checkbox"/> GOODY BAG ASSEMBLY | <input type="checkbox"/> TABLE TOP COVERAGE |
| <input type="checkbox"/> FLYER DISTRIBUTION | <input type="checkbox"/> POSTER DISTRIBUTION | <input type="checkbox"/> SET-UP | <input type="checkbox"/> TEAR-DOWN |
| <input type="checkbox"/> DAY OF REGISTRATION | <input type="checkbox"/> RAFFLE TICKET SALES | <input type="checkbox"/> EXHIBIT BREAK FILL-IN | <input type="checkbox"/> DAY OF EVENT "RUNNER" |
| <input type="checkbox"/> OTHER _____ | <input type="checkbox"/> OTHER _____ | | |

NOTES:

SIGNATURE _____

DATE _____

 **Mail completed form or Fax to (888) 252-3833** 

FOUR PAWS SOCIETY® ♦ 1371A E. 14th Street #124 ♦ San Leandro, CA 94577
Telephone: (510) 910-2754 ♦ Fax: (888) 252-3833 ♦ Website: www.FourPawsSociety.org