

Volunteer Information Form

Fill in this electronic form by clicking in the answer spaces. Send form to volunteering@rabbitrr.org

Name and contact information.

Name: _____

Street: _____

City, State, Zip: _____

Primary Phone: _____

Secondary Phone: _____

e-mail address: _____

Birthday (month/day): _____

Would you like to receive our weekly adoption e-mail message?: Yes

How would you like to help?

Feeding:

Pen cleaning:

Bunny grooming:

Fundraising events:

Other (specify): _____

Availability.

Please indicate the days and times you are available, and the frequency:

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday

Frequency :

Every week:

Every other week:

Once per month:

Other: _____

About You

Do you own bunnies, or have you in the past?

Please tell us your reasons for volunteering with us.