



**Pet Access League Society**

3019 - 21 Street N.E.  
Calgary, AB, T2E 7T1  
Tel. (403) 250-7257  
Fax (403) 250-9273  
Email [info@palspets.com](mailto:info@palspets.com)  
[www.palspets.com](http://www.palspets.com)  
Charitable registration # 10781 1879 RR0001

Dear Applicant;

Thank you for your interest in PALS. PALS is a non-profit, registered, charitable organization dedicated to enhancing the quality of life of individuals through visits with pets. It began under the auspices of the Calgary SPCA in 1982 and became a separate organization in 1985. PALS has one full-time employee and one part-time employee and is governed by a board of up to 15 directors. PALS is funded by the Wild Rose Foundation, private donations and by fundraising events such as raffles, casinos. Clients receive PALS' services at no charge.

PALS is the largest organization of its kind in North America visiting within one city. Over 500 volunteers and their four-legged pals form 63 teams of 2 - 12 people per team. They visit 50 facilities, including hospitals, long term care facilities, group homes, and a correctional centre. Visits are up to one and a half hours long and can include both group visits and one-on-one visits.

**PALS clients are mostly seniors and can be cognitively delayed, physically disabled, or virtually unresponsive. The animals will often evoke a response in these individuals, thus they serve as a bridge for communication between volunteer and client.**

**PLEASE BE AWARE THAT POTENTIAL PALS VOLUNTEERS ARE REQUIRED TO:**

- Complete and return this application form
- Attend a personal interview with your pet
- Accompany your animal to a pet screening test
- Provide proof of your pet's protection against rabies
- Have your veterinarian complete a Pet Health Assessment
- Pass a Calgary Police Service or RCMP Security Clearance

**IF ACCEPTED, NEW PALS VOLUNTEERS ARE REQUIRED TO:**

- Make a firm commitment for a minimum of 1 year to visit with a PALS team twice a month**
  - Considerable time and effort are involved in qualifying a volunteer and their pet for PALS
  - Commitment on the part of volunteers is essential to the success of the PALS program
  - Clients, facilities and other PALS volunteers depend on your attendance
  - A volunteer will lose his/her status as a PALS volunteer if more than three consecutive months are missed
- Attend a PALS orientation
- Attend a separate facility orientation if required
- Purchase an annual PALS membership (\$20.00 single, \$30.00 family)
- Participate in at least one fundraising event per year
- Provide annual proof of vaccination and/or Pet Health Assessment as requested.
- Attend pet re-screens as required.

If PALS is the organization for you, we are pleased to have you complete the accompanying application form. If you have any further questions, please feel free to contact the PALS office.

Sincerely,  
Sandra Johnston  
Executive Director, PALS

# *Pals* Volunteer Registration Form

Miss Mrs. Ms. Mr.

Last Name	First Name	Initial
Address		
City		Postal Code
Telephone Residence	Business	Fax
Employer		E-mail
Occupation		

Age Group    16-18    19-30    31-45    46-65    65+

In case of emergency, please contact: \_\_\_\_\_ Phone \_\_\_\_\_

How did you hear about PALS and/or our pet visitation program?  
 \_\_\_\_\_

Why are you interested in becoming a PALS volunteer?  
 \_\_\_\_\_

Have you had any experience (as a volunteer, in a paid position, or otherwise) working with:  
           Children    Elderly    Physically Disabled    Mental Health    Cognitively Delayed

If yes, please provide details:  
 \_\_\_\_\_

**(Optional)** Do you have any physical or medical limitations or concerns that may limit the extent of your participation in the PALS pet visitation program or as a volunteer in other areas?  
 \_\_\_\_\_

Do you have your own transportation?    Yes    No

**Please list all pets you wish to enroll and have screened for PALS:**

PET'S NAME	TYPE & BREED	BORN (month/year)	SEX M - F	SPAYED OR NEUTERED

Which veterinary clinic do you use?  
 \_\_\_\_\_

**Currently, rabies vaccinations are mandatory for all pets accepted into our program.**

Do you currently provide this protection for your pet(s)\*?    Yes    No- but I will do so prior to my Initial interview.

Do you have any experience with animals, other than as a pet owner?  
 (i.e. obedience trainer, breeder, veterinary assistant, etc.)    Yes    No

If yes, please explain:  
 \_\_\_\_\_

\* Non-canine/feline species such as rabbits, guinea pigs and hamsters do not require a rabies vaccination. Ferrets do require a current rabies vaccination.



## References:

PALS requires that all applicants provide three references and, yes, we do contact them so please ensure that the information provided to us is complete and accurate

1. References cannot be family members.
2. To prevent awkward situations please let the person know to expect a call.
3. Please ensure phone numbers are correct & current.
4. Unless absolutely necessary, please use local references.
5. Please print clearly.

NAME	RELATIONSHIP	HOME PHONE NUMBER	WORK PHONE NUMBER	FAX NUMBER	E-MAIL ADDRESS

### Authorization to Contact References

I give authorization to Pals Pet Access League Society of Calgary to contact the references I have listed.

Signature \_\_\_\_\_

Date \_\_\_\_\_