



PO BOX 1544, Terrell TX 75160, 214-802-6798

www.PrideRock.org

Name: _____ DOB: (m/d/y): _____ male/female (circle one)

Address: _____

City: _____ State: _____ Zip: _____

Phone: (Daytime) _____ Cell: _____

Emergency Contact Name: _____ Number: _____

Email Address: _____

What experience do you have working with animals: _____

How do you feel about hard, dirty work in extreme weather conditions:

Why are you being required to do community service, and if so for what offense:

How many hours are you required to have & by what deadline: _____

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