



# ANIMAL BRIGADE SERVICE CLUB APPLICATION

## STUDENT INFORMATION

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Date of birth: \_\_\_\_\_

Street address: \_\_\_\_\_

City, state, ZIP: \_\_\_\_\_

Phone number: \_\_\_\_\_ Email: \_\_\_\_\_

School: \_\_\_\_\_ Grade:  6<sup>th</sup>  7<sup>th</sup>  8<sup>th</sup>

**What experience do you have with animals? (Please describe)**

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**Why do you want to participate in the Richmond SPCA's Animal Brigade Service Club?**

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## PARENT/GUARDIAN INFORMATION

Name: \_\_\_\_\_ Relationship to student: \_\_\_\_\_

Phone number: \_\_\_\_\_ Email: \_\_\_\_\_

Please return completed applications to:

Email: [cmoses@richmondspca.org](mailto:cmoses@richmondspca.org)

Mail: ATTN: Chanel Moses, Richmond SPCA  
2519 Hermitage Road  
Richmond, VA 23220

