



What is Pet P.A.L.S.?

The Pet P.A.L.S. Kids Club is for kids age's eight to twelve who have a passion for animals and want to learn more. Pet P.A.L.S. Kids Club members meet for two hours a month on a Friday from 4PM to 6PM at the Humane Society. The Pet P.A.L.S. Club focuses on socialization of shelter animals, while exploring the field of animal welfare for younger audiences. All animal interactions are structured and supervised by certified Humane Educators and includes pets that are behavior or temperament tested.

TO APPLY:

Space is limited for our Pet P.A.L.S. Kids Club. Membership fee is \$60 for one quarter, September through December or January through April, \$100 for the entire school year, or try one meeting for just \$15. Membership includes Pet P.A.L.S. T-Shirt, Membership Certificate, snacks and drinks for each meeting, and all craft fees. There are two age groups, Critter Crew ages eight to nine, and Animal Ambassadors ages ten to twelve. Please consult the chart below to see the meeting dates for the 2010-2011 Pet P.A.L.S. schedule. Once you are registered, you will receive a confirmation letter with additional information. Please contact the Education Department at (770) 532-6617 or by email at KelleyUber@hsnega.org with further questions.

2011-2012 Pet P.A.L.S. Schedule

All Pet P.A.L.S. meetings take place from 4:00P.M. to 6:00P.M.

	Critter Crew (8-9)	Animal Ambassadors 1 (10-12)	Animal Ambassadors 2 (10-12)
September	September 2	September 9	September 23
October	October 7	October 21*	October 28
November	November 4	November 11	November 18*
December	December 2	December 9	December 23
January	January 6	January 13	January 27
February	February 3	February 10	February 24
March	March 2*	March 9	March 23
April	April 6	April 13	April 27

* Some dates are subject to change or already reflect changes due to HSNEGA Special Events and Holiday Calendar upon significant notice



Pet P.A.L.S 2011-2012

(Preparing Animals for Love and Shelter)

Club Member Application

Please Circle Age Group:

Critter Crew (Ages 8-9)

Animal Ambassadors 1 (Ages 10-12)

Animal Ambassadors 2 (Ages 10-12)

Please Circle Session:

Half of School Year/ \$60
(September to December or January to April)

Full Year/ \$100
(September to April)

Child's Information:

Name _____
First Middle Initial Last

Address _____
Street/ P.O. Box City State Zip

Home Phone: _____ Age: _____ Grade: _____

Date of Birth: _____ Gender (*Please Circle*): Male Female

Allergies or Special Needs:

Parent/Guardian Information #1 (*lives with Club Member/ Same Address*):

Name _____
First Middle Initial Last

Home Phone _____ Cell Phone _____ Fax #: _____

Work Phone _____ Email Address: _____

Parent/Guardian Information #2:

Name _____
First Middle Initial Last

Address (If Different):

Street/ P.O. Box City State Zip

Home Phone (If Different from Club Member) _____ Cell Phone _____

Work Phone _____ Email Address: _____

Emergency Contact Information

Emergency Contact: _____ Relation: _____
Name & Phone Number

Emergency Contact: _____ Relation: _____
Name & Phone Number

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**LIABILITY RELEASE, INDEMNIFICATION, AND MEDICAL RELEASE**

I am aware of the nature of this activity and I hereby assume responsibility for my child \_\_\_\_\_, to participate in the Pet P.A.L.S. program. I understand that such participation may include being photographed for publicity or fundraising purposes. I understand that participation in the Pet P.A.L.S. program can result in bodily injury to my child, including, but not limited to cuts, scrapes, or bites. Humane Society of Northeast Georgia staff will notify me immediately if any serious injury is to occur. I will not hold the Humane Society of Northeast Georgia and/or its Board of Directors, employees, agents, and volunteers responsible in the case of accident or injury as a result of my child's participation in the Pet P.A.L.S. program and its related activities. Such indemnification shall include, but not limited to, liability settlements, damage awards, costs and attorney's fees associated with any such claim. In situations which are true emergencies and only when I cannot be reached immediately, I authorize a representative of the Humane Society of Northeast Georgia, Georgia to obtain immediate medical care and I consent to the hospitalization of, the performance of necessary diagnostic tests upon, the use of surgery on, and/or the administration of drugs to my child if an emergency occurs when I cannot be located immediately. I will not hold the Humane Society of Northeast Georgia and/or its Board of Directors, employees, agents, and volunteers responsible for injuries or damages sustained by my child as a result of the immediate medical care. I understand that I am responsible for payment of medical expenses.

Name of Insurance Company: \_\_\_\_\_ Policy Number: \_\_\_\_\_

Child's Physician/Clinic: \_\_\_\_\_ Phone Number: \_\_\_\_\_

\_\_\_\_\_  
Parent/Guardian's Signature

\_\_\_\_\_  
Date

**Membership Fees:**      \$60 per ½ School Year      \$100 for Entire School Year  
                                         \$15 Per Single Meeting (Drop-In Basis)

**Please Return Form with Payment to:**

Pet P.A.L.S. Club/ Humane Society of Northeast Georgia  
845 West Ridge Road, Gainesville, GA 30501

**Contact Information:** Kelley Uber • KelleyUber@hsnega.org • (770) 532-6617

\_\_\_\_\_ Check Enclosed      *Please Charge My* \_\_\_\_\_ MasterCard \_\_\_\_\_ Visa

Card #: \_\_\_\_\_ Exp Date: \_\_\_\_\_

Name on Card: \_\_\_\_\_ CVV# (On Back): \_\_\_\_\_

Please Make Checks Payable to: The Humane Society of Northeast Georgia  
*All Credit Card information will be securely destroyed upon registration*

**Pet P.A.L.S. Meeting Times:**

Critter Crew (Ages 7-9) Meet the First Friday of the Month from 4PM to 6PM

Animal Ambassadors 1 (Ages 10-12) Meet the Second Friday of the Month from 4PM to 6PM

Animal Ambassadors 2 (Ages 10-12) Meet the Fourth Friday of the Month from 4PM to 6PM

\* Some meetings dates are scheduled to change with significant notice. Upon Registration, you will receive a Confirmation Letter with the Meeting Schedule for 2011-2012.

FOR OFFICE USE ONLY

\_\_\_ Cash      \_\_\_ Check      \_\_\_ Credit      Receipt # \_\_\_\_\_      Staff: \_\_\_\_\_