**North Georgia Zoo/ Wildlife W onders Volunteer Application**



 Wildlife Wonders Phone: 706 348-7279

 P.O 2237 email: Info@wildlifewonders.org

 Cleveland, GA 30528 online: www.wildlifewonders.org

Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City/State/Zip:……………………………………………………………………………………………………………

Home Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Male Female Birthdate………………

Marital Status\_\_\_\_\_\_\_\_ No. of children……………………….

Spouse’s Name (if married):……………………………………….. Anniversary Date (if married): ……………

Is your spouse involved in volunteering at WW? ❑Yes ❑No If yes, where:………………………………
Alias (or other names you’ve gone by):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Present Employer:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
May we call you at work? ❑Yes ❑No Work phone:

Have you completed a Volunteer Application of WW before? ❑Yes ❑No
List any gifts, callings, training, education, or other factors that you feel may help you succeed in this opportunity:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Is your family in agreement with your involvement here at WW? Yes No

Have you ever been involved in volunteering before? ❑Yes ❑No

 If yes, in what areas?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
With what organization?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

During the past seven years have you been convicted of a crime? ❑Yes ❑No If yes, please explain:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you been accused of and/or convicted of child abuse or a crime involving actual or attempted sexual molestation of a minor? ❑Yes ❑No
If you answered yes, please explain: ……………………………………………

……………………………………………………………………………………………………………………………………………………………………………………………………………………………
Do you presently have any communicable diseases (including HIV or AIDS)? ❑Yes ❑No
If yes, please explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you smoke? ❑Yes ❑No Drink? ❑Yes ❑No Use illegal drugs? ❑Yes ❑No
Do you have any conditions preventing you from performing certain types of activities relating to volunteering opportunities? ❑Yes ❑No If yes, please explain:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
**Please check all areas you are wiling to be involved in. Circle ones that most interest you.**

On-site: North Georgia Zoo Outreach: Public Relations Outreach: Zoo-To-You programs

\*🖵Greeter/Hospitality 🖵Putting out Flyers 🖵Festival/Large event help

\*🖵 Petting Zoo area 🖵attending events/Promotions 🖵Petting Zoo help 🖵Camp 🖵Getting Sponsors 🖵Driver:

 \*🖵 Special Events 🖵Conferences (ability to drive truck/trailer)
🖵Assisting Tours 🖵Grant Writing 🖵Vehicle Maintenance
🖵Ticket booth 🖵Membership 🖵program assistant \*🖵Livestock Animal Care: 🖵 Newsletter/Publication 🖵organizing, cleaning

 (brushing, washing etc) 🖵 Fundraising
\*🖵Cleaning/Organizing 🖵 Other:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*🖵Repairs/maintenance \* \*\* Other areas of volunteering require level 2 training

🖵Landscaping Areas include but not limited to: Animal training,

***\*\* only starred areas can be done with children*** assisting exotic animal Zookeeper and programs.

Why do you want to be involved in volunteering at WW?………….....................................................
……………………………………………………………………………………………………………………………

|  |  |
| --- | --- |
| **General Information**: |  |
| Do you have medical insurance? Y N. If so, please identify the insurance company and policy number in case of emergency.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| In case of emergencies, do you have any allergies or medical conditions that we should be aware of?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Are their any other physical or mental conditions that we need to be aware of? |
| PERSONAL REFERENCES  (Not Employees or relatives)Name:………………………………………………. Name:……………………………………………….Address:……………………………………………. Address:…………………………………………….Telephone:…………………………………………. Telephone:…………………………………………. |
|  |  |  |  |  |  |
|  |  | \_\_Other |  |  |  |

 **Wildlife Wonders**

**Release of Liability and Assumption of Risk**

**This document affects your legal rights, please read it carefully**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, am aware that while volunteering, working at, or visiting Wildlife Wonders, I may encounter certain risks, including risk associated with being around the animals at WW. I am voluntarily participating in these activities with knowledge of the potential danger and risk involved, and hereby agree to accept any and all risk of injury or death.

In consideration of WW allowing me to volunteer, work at, or visit the property and be around the animals, I agree that I WILL NOT sue, or otherwise make any claim against WW, its directors, officers, employees, agents, contractors, volunteers, or against any land owner or lessee whose property may be used, for injury, damage, or death resulting from the negligence or other acts or omissions, however caused, by any WW directors, officers, employees, agents, contractors, volunteers, or any third person as a result of my volunteering, working at, or visiting WW.

I also agree to release and forever discharge WW, its directors, officers, employees, agents, contractors, volunteers from any and all actions, claims or demands for myself, my heirs or personal representatives, for injury, death or damage resulting from volunteering, working at, or visiting WW. The terms of this Release shall also be binding as to any of my minor children who may accompany me.

I hereby agree to follow any and all instructions given to me by any representative of WW. I agree to remain behind designated safety barriers or in designated areas and will not attempt to approach an animal or cage without express approval from WW and will not attempt to stick any item, including body parts, into a cage. I further agree not to handle any animal or put myself or others in any type of jeopardy by handling or provoking an animal.

WW expressly reserved the right to dismiss any person(s) or groups of persons if a representative of WW determines, at his or her sole discretion, that said person(s) are exposing themselves, others, or the animals to risk of injury.

**I have carefully read this Agreement and fully understand its contents. I am aware that this is a RELEASE OF LIABILITY and I sign it of my own free will.**

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_

Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ST: \_\_\_\_\_\_\_ Zip:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: (\_\_\_\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Signature

If under 21 years of age, a parent or custodian must release WW of liability for that minor.

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Signature

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Printed Name

**General Rules**

1.No one is allowed to come on the property without permission from the directors. You must have an appointment time set up. If no one is around you must wait till someone shows up.

IF WE FIND VOLUNTEERS WANDERING AROUND OUR PROPERTY WHEN WE ARE NOT HOME THERE PRIVLAGES AS A VOLUNTEER WILL BE TERMINATED

 2.NEVER stick you fingers in a cage

 3.NEVER open ANY gate (compound or animal cage or farm animals) unless you have permission by

 a zoo keeper.

 4.NEVER go across the creek or behind the house without permission.

 5. NEVER EVER Feed an animal without the keepers permission.

 6.NEVER go into the house without permission.

volunteers must be 16 years or older. (there are a few exceptions see director about younger volunteers.)

 7. Attendance at volunteer meetings is mandatory. Meetings will not be held

 often, however will be held in order to keep up with new procedures.

 9. Wildlife Wonders reserves the right to permanently excuse anyone from the

 volunteer program or from the center at anytime if their conduct is deemed

 unbecoming for a person representing Wildlife Wonders.

10. No animal abuse of any kind will be tolerated.

11. No part of your person shall come within 3 feet of any cage that is not

 marked appropriately for your level.

12. No perfumes, colognes, or hairsprays shall be worn when at Wildlife Wonders

Proper attire is necessary to eliminate scrapes and scratches. .

 13. No dangling jewelry, large shiny barrettes, pins, hair ties or large objects shall be worn.

 14. No smoking shall be permitted on the premises due to the extreme fire hazards that go with

 living in the forest.

15.No food or toys shall be offered to any animal without prior approval from management**.**

 16. No alcohol or drugs shall be consumed prior to, or while working at Wildlife Wonders.

 17. Any person believed to be impaired due to alcohol or drugs will be asked

 to leave the property for the day. We ask that all volunteers bring any

 infraction of this rule to management.

 18. No running, horseplay or loud noises on the property. This is a sanctuary is for the animals.

 19. Please do not bring your domestic pets. The Wildlife Wonders animals can be susceptible to canine and feline diseases.

 20. All litter shall be deposited in trash receptacles.

 21. If you have been entrusted with enclosure codes or keys, DO NOT share

 22. When you complete a project, do not walk away until all of the tools,

 materials and debris have been put away or discarded.

 23. If you don’t know the answer to a question asked of you, please do not

 make one up. Tell the person that you will find out for them and then do so.

 Bad information is worse than none at all and your words and actions are

 a reflection of our mission.

 24. A professional attitude in working relationships between staff members

 should be maintained so as to enhance the operations of the center.

25. Proper attire must be worn in accordance with Wildlife Wonders dress code: On site: this includes but not limited to closed toed shoes and long pants at all times. Off site: closed toed or other approved foot wear that is considered sturdy, professional and safe. Flip Flops are never approved, some sandals are okay. Please check with your employer to ensure you are wearing approved footwear.

I have read the above and understood all of these rules and procedures. I also understand that these rules are subject to amendments later on. I agree to abide and enforce these rules.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Printed name Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City, State Zip

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of legal guardian in under 21 years of age

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Witness