

# North Georgia Wildlife & Safari Park - Wildlife Wonders – Zoo To You

2754 Paradise Valley RD  
Cleveland, GA 30528



Phone: 706-348-7279  
mail: [info@wildlifewonders.org](mailto:info@wildlifewonders.org)

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## Basic Volunteer Application:

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

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

City/State/Zip: \_\_\_\_\_

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

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

Male Female Birthdate: \_\_\_\_\_ Marital Status \_\_\_\_\_ Spouse's Name (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 as a volunteer: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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? \_\_\_\_\_

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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 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: \_\_\_\_\_

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Please check all areas you are willing to be involved in. Circle the ones that most interest you.

### On-site: North Georgia Zoo

- \*  Greeter/Hospitality
- \*  Petting Zoo area
- Camp
- \*  Special Events
- Assisting Tours
- Ticket booth
- \*  Livestock Animal Care:  
(brushing, washing etc)
- \*  Repairs/maintenance \*

### Outreach: Public Relations

- Putting out Flyers
- attending events/Promotions
- Getting Sponsors
- Conferences
- Grant Writing
- Membership
- Newsletter/Publication
- Fundraising
- Landscaping

### Outreach: Zoo-To-You programs

- Festival/Large event help
- Petting Zoo help
- Driver  
(ability to drive truck/trailer)
- Vehicle Maintenance
- program assistant
- Organizing, Cleaning
- Other: \_\_\_\_\_

\*\* Other areas of volunteering require level 2 training:

These areas include but are not limited to Animal training, assisting exotic animal Zookeeper, and programs. \*\*

**\* only starred areas can be done with minors**

Why do you want to be involved in volunteering at WW:

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## 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 there any other physical or mental conditions that we need to be aware of?

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## PERSONAL REFERENCES

(Not Employees or relatives)

Name:.....

Name:.....

Address:.....

Address:.....

Telephone:.....

Telephone:.....

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**Wildlife Wonders LLC**  
**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 North Georgia Wildlife Park & Safari, Wildlife Wonders, Zoo To You, that I may encounter certain risks, including risks associated with being around the animals during my volunteering at any Wildlife Wonders LLC activities. 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 Wildlife Wonders LLC 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 Wildlife Wonders LLC, 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 Wildlife Wonders LLC directors, officers, employees, agents, contractors, volunteers, or any third person as a result of my volunteering, working at, or visiting Wildlife Wonders LLC.

I also agree to release and forever discharge Wildlife Wonders LLC, its directors, officers, employees, agents, contractors, and 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 Wildlife Wonders LLC. 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 Wildlife Wonders LLC. 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 Wildlife Wonders LLC 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 Wildlife Wonders LLC 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

Date

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

Signature

Printed Name of Parent or Guardian

Date