

WILDRESCUE'S WILDLIFE SAR VOLUNTEER APPLICATION

Name: _____ M F DOB _____

Address: _____ City: _____ Zip: _____

Phone(s): _____

Mobile phone service provider: _____

Check here if you **DO NOT** want to be alerted of rescues through texts.

Email: _____

Emergency Contact Name: _____ Phone(s): _____

Parent/Guardian (if under 18): _____

Auto Insurance Provider: _____

Do you have any health problems or physical conditions that may interfere with performance of work related duties? Y N If yes, explain: _____

Date of last Tetanus shot: _____

Profession / Occupation: _____

Hobbies: _____

Skills: _____

Training: _____

Type of vehicle(s) for transport: _____

CIRCLE AREAS OF INTEREST: wildlife rescue wildlife transport clerical data entry
accounting computers media relations historian (news clippings etc.) video production go-fer
supplies/logistics fundraising procurement (supplies/equipment) grant writing public outreach
newsletter web site (design/management) phones (dispatch) volunteer coordinating research

How do you see yourself fitting in - how do you wish to be of service: _____

WILDLIFE SAR ON-CALL VOLUNTEER

FIRST RESPONDER TRANSPORTER OTHER

WE MUST RECEIVE A COMPLETED AND SIGNED AGREEMENT AND WAIVER BEFORE WE CAN PROCESS YOUR APPLICATION. SUBMIT YOUR PAPERWORK TO **WILDRESCUE P.O. BOX 65, MOSS LANDING, CA 95039 FAX 415-979-9700** or email to rebecca@wildrescue.org. IF A MINOR IS TO BE INVOLVED, PLEASE MAKE SURE TO FILL OUT A SEPARATE APPLICATION AND WAIVER.