

WILDRESCUE VOLUNTEER APPLICATION

Name: _____ M F DOB _____

Address: _____ City: _____ Zip: _____

Phone(s): _____

Driver's Lic: _____ Exp: _____ Auto Insurance Provider: _____

Email: _____

Emergency Contact Name: _____ Phone(s): _____

Parent/Guardian (if under 18): _____

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 rescues wildlife transport clerical data entry accounting computers media relations historian (news clippings etc.) video production supplies/logistics fundraising procurement (supplies/equipment) grant writing public outreach newsletter web site (design/management) phones (dispatch) volunteer coordinating research gopher

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

RESCUE TEAM VOLUNTEER POSITIONS

ON-CALL VOLUNTEER. From your home/office you commit to being available to receive requests from us to help rescue or transport an animal. You will be expected to accept invitations during the days/hours you indicate. We have a 3-strike policy – if you are unable to accept 3 volunteer requests, you will lose your volunteer position. We require a minimum of 8 hours a month. Please list the days/hours you're available to be ON-CALL:

WILDLIFE TRANSPORTER

WILDLIFE PARAMEDIC TEAM

Please list the day(s) you are available. This is different than being On-Call as you're committing to full days throughout which we may call upon you to transport or assist with rescues.

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 831.460.2756**. IF A MINOR IS TO BE INVOLVED, PLEASE REQUEST AN ADDITIONAL APPLICATION AND WAIVER.