



Exotic Animal Handling Volunteer Application Form

Applicant Information:

- Full Name: _____
- Date of Birth (Must be 16 or older): _____
- Address: _____
- Phone Number: _____
- Email Address: _____

Emergency Contact:

- Name: _____
- Relationship: _____
- Phone Number: _____

Availability:

- Preferred Days (circle all that apply): Monday | Tuesday | Wednesday | Thursday | Friday | Saturday | Sunday
- Preferred Time Slots: _____

Experience & Skills:

- Do you have any experience handling exotic animals? (Yes/No)
If yes, please describe: _____
- Are you comfortable working with animals such as reptiles, birds, or small mammals? (Yes/No)
- Do you have any relevant certifications or training? (Yes/No)
If yes, please specify: _____

Health & Safety:

- Do you have any allergies or medical conditions that may affect your ability to work with animals?
(Yes/No)

If yes, please explain: _____

- Are you up to date on your tetanus vaccination? (Yes/No)

Why Do You Want to Volunteer?

(Briefly explain your interest in volunteering with exotic animals)

Agreement & Signature:

I understand that volunteering with exotic animals carries inherent risks, and I agree to follow all safety protocols and instructions provided by the organisation. I certify that all information provided is true and accurate to the best of my knowledge.

- Applicant Signature: _____

- Date: _____

Parental/Guardian Consent (If Under 18):

I, _____, give my consent for my child to volunteer with Amanda's Creature Comfort's CIC and acknowledge the risks involved.

- Parent/Guardian Signature: _____

- Date: _____