**Volunteer Application**

For Volunteers 15 and Older Please Print Clearly

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E- mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Contact - Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Relationship:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Contact Numbers: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Occupation and Employer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Special Skills and Hobbies: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Previous or Current Experiences: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Education Level: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Is your volunteering required by another organization or school? (Circle one) YES NO

Organization Requiring Hours: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ By what date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Any allergies, physical disabilities, or other limitations that may require accommodation or may restrict volunteer experience? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you foresee any drastic changes to your availability? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Can you handle working outside in the Florida summer heat? (Circle One) YES NO

Why are you interested in volunteering at Busch Wildlife Sanctuary? **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Please ORDER your preferences for position: Please circle times available:

\_\_\_\_Animal Care (Sanctuary) Monday: Mornings: 8am- 12pm Afternoon: 1pm – 5pm

\_\_\_\_ Animal Care (Hospital) Tuesday: Mornings: 8am- 12pm Afternoon: 1pm – 5pm

\_\_\_\_ Education Wednesday: Mornings: 8am- 12pm Afternoon: 1pm – 5pm

\_\_\_\_ Landscaping/Horticulture Thursday: Mornings: 8am- 12pm Afternoon: 1pm – 5pm

\_\_\_\_ Office Assistant (Clerical duties) Friday: Mornings: 8am- 12pm Afternoon: 1pm – 5pm

\_\_\_\_Guest Services (Gift Shop) Saturday: Mornings: 8am- 12pm Afternoon: 1pm – 5pm

\_\_\_\_Discovery Center (Docent) Sunday: Mornings: 8am- 12pm AS NEEDED

\_\_\_\_Trail Greeters

**Requirements**

The Busch Wildlife Sanctuary Volunteer program has a 3 month commitment with one 4 hour shift a week requirement. We are dedicated to educating our volunteers and with that comes a lot of training. Making this commitment will ensure enough time for training and being able to be fully involved in the rehabilitation process.

**Risk Factors**

Volunteering at the Busch Wildlife Sanctuary can be a very rewarding experience. Volunteers will have the opportunity to

meet other people with similar interests, learn about nature and wildlife, help injured animals, and assist the Sanctuary in

teaching visitors about Florida’s natural resources.

Even though many safety features have been installed in the animal enclosures, working with wild animals can be dangerous. The Sanctuary’s staff will do their best to help volunteers learn about working with these types of animals. However, because volunteers often work in close proximity to live animals there is always the potential to be injured, bitten or scratched.

Simply being aware of this fact, using common sense, taking proper care as you work, and asking staff for assistance when

you have a question will go a long way towards preventing any injuries.

Although most of the permanent residences at the Sanctuary have received vaccinations, the injured animal patients that are brought in for care have not. By volunteering to work at the Busch Wildlife Sanctuary, you must understand that you are accepting certain risks. It is impossible for the Sanctuary to guarantee your safety while you are volunteering your time. We

welcome volunteers to donate their time, but they must do so at their own risk!

**Volunteers must sign the Certification and the Waiver and Release below before they can begin volunteering their time.**

**Parental signature is also required if the volunteer is under 18 years of age.**

**Certification**

I certify that I have read and understand the application and that the answers and statements given by me are complete and true to the best of my knowledge and belief. I understand that any false information, omissions or misrepresentations of facts called for in the application may result in rejection of my application or dismissal at any time. I authorize the company, and/ or its agents, including consumer reporting bureaus, to verify any of this information including, but not limited to, criminal history and motor vehicle driving records. I release all persons, schools, companies and law enforcement authorities from any liability for any damage whatsoever for issuing this information. I understand that the use of illegal drugs is prohibited. If company policy requires, I am willing to submit to drug testing to detect the use of illegal drugs.

**Waiver and Release**

In consideration of my acceptance as a volunteer, I, or my heirs, executors and administrators, release and forever discharge the Busch Wildlife Sanctuary and the Loxahatchee River District and all officers, directors of those entities: as well as sponsors, producers, their agents, representatives, successors and assigns of all liabilities, claims, actions, damages, costs or expenses which I may have against them arising out of or in any way connected with my participation in this course of conduct. ("Volunteer at Busch Wildlife Sanctuary"), including travel to or from volunteering, and including injuries which may be suffered, or caused by me before, during or after my volunteering service. I understand that this waiver includes any claims based on negligence, action or inaction of any of the above parties. I specifically assume any and all duties arising from volunteering at Busch Wildlife Sanctuary. I will indemnify Busch Wildlife Sanctuary and the Loxahatchee River District from any and all harm caused by me, and any member of my family, which may arise from my participation in volunteering at the Busch Wildlife Sanctuary.

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Signature Print Name Date

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

Parental Signature Print Name Date