



Moraine Ridge Wildlife Rehab Center

Volunteer Application

Date: _____

Date of Birth: _____

Name: _____

Phone: _____

Address: _____

Alternate Phone: _____

City: _____

State: _____ Zip: _____

E-Mail: _____

Best time to call: _____

I am currently: Retired Employed Unemployed Attending School

Current profession: _____

Do you have any special skills that you feel may benefit MRWRC?

When are you available to volunteer? Please state days and times. Note: Shifts run 8-12 and 12-4.

Are you willing to commit to volunteering at least 4-8 hours a month?

Have you volunteered or fostered for any other rescue organizations or animal shelter?

Other than your love of animals, why do you want to volunteer for MRWRC?

Are you doing community service hours for school?

Do you have any limitations that might affect your volunteering? (i.e. allergies, lifting, limited walking, etc.)

How did you find out about us?

Name: _____

Emergency Notification

IN CASE OF EMERGENCY – NOTIFY:

Name: _____

Relationship: _____

Phone: _____

Address: _____

Alternate Phone: _____

City: _____

State: _____ Zip: _____

Release Form for Minor Child Under 18 Years of Age

I agree to permit my child, _____, to be a volunteer under my supervision at the Moraine Ridge Wildlife Rehab Center. I _____, hereby fully and forever release and discharge Moraine Ridge Wildlife Rehab Center, its agents, employees, directors, officers, and liability insurance carriers, from all action, damages, or judgments which my child has now or in the future against the Moraine Ridge Wildlife Rehab Center for all injuries to my child, known or unknown, and/or arising out of the activities of my child as a volunteer of the Moraine Ridge Wildlife Rehab Center. I consent to and authorize Moraine Ridge Wildlife Rehab Center to use any photographs taken of my child for public relations

For the volunteer under the age of 18, I, the legal guardian, have read this release and understand all of its terms, and execute it voluntarily and with full knowledge of its significance.

IN WITNESS HEREOF, I have hereunto set my hand.

SIGNATURE

DATE

Adult Release Form

I, _____, hereby fully and forever release and discharge the Moraine Ridge Wildlife Rehab Center, its agents, employees, directors, officers, and liability insurance carriers, from all action, damages, or judgments which I have now or in the future against the Moraine Ridge Wildlife Rehab Center for all personal injuries to myself, known or unknown, and/or arising out of the activities of myself as an adult volunteer of the Moraine Ridge Wildlife Rehab Center. I consent to and authorize the Moraine Ridge Wildlife Rehab Center to use any photographs taken of me for public relations purposes.

I am also stating that I am over the age of 18, and I, the undersigned, have read this release and understand all of its terms, and I execute it voluntarily and with full knowledge of its significance.

IN WITNESS WHEREOF, I have hereunto set my hand.

SIGNATURE

DATE