



Elmira's Wildlife Sanctuary Volunteer Application

Name _____
Address _____
City/State _____ Zip _____
Email _____
Phone Home _____ Cell _____

Animal Keeper Please complete this section if you would like to work with animals

Can you commit to 4 hours one day per week? YES NO
Any previous experience with animals? YES NO
Do you have allergies? YES NO
Can you handle raw meat? YES NO
Can you lift up 50 lbs.? YES NO

Other Opportunities

Tour Guide YES NO
Fundraising Events YES NO
Grounds Keeping YES NO
General Maintenance YES NO
Meat Preparation YES NO
Carpentry YES NO
Electrical YES NO
Cage Building YES NO

Availability

Mon Tues Wed Thurs Fri Sat Sun
 Weekly Bi-Weekly

Please add any skills/abilities/comments

Age Under 18 18-25 26-40 41-55 Over 56

Emergency Contact _____ Phone _____

Signature _____ Date _____

PLEASE EMAIL THIS APPLICATION TO

info@elmiraswildlife.org

OR MAIL TO

Volunteer Coordinator
Elmira's Wildlife Sanctuary
PO BOX 63
Wimauma, FL 33598

PLEASE NO PHONE CALLS

PLEASE DO NOT WRITE BELOW THIS LINE

Contact History

Date	Time	Method	Outcome
		<input type="checkbox"/> Email <input type="checkbox"/> Phone	
		<input type="checkbox"/> Email <input type="checkbox"/> Phone	
		<input type="checkbox"/> Email <input type="checkbox"/> Phone	

Orientation

Date _____ Orientation By _____

Position _____

Start Date _____

Volunteer Days _____

Volunteer Hours _____