



HCNC Volunteer Application

Contact Information:

Name:	
Street Address	
City, State, Zip Code	
Home Phone	
Work or Cell Phone	
Email Address	

Please check the appropriate category:

Adult: Over 18 years old. Youth: Between 14 and 18 years old.

Family: Adult with child(ren)

Children's ages 5 and under 6 to 11 12 to 18

Number of children in each age group 5 and under 6 to 11 12 to 18

Interest: Please check all areas of interest

- General Office/Staff Aide Gift Shop Hospitality Staff Fund Raising
 Community Outreach Special Events Adopt-A-Garden Wildlife Foster
 Adopt-A-Wildlife Cage Wildlife Rehab Infirmary Wild Wonders Park Bird Feeder
 Wild Wonders Park Mammals Feeder Wild Wonders Park Owl Feeder
 Filling Bird Feeders Summer Junior Volunteer Program High School Community Service

Availability: Please indicate day(s) of the week you are available.

Monday Tuesday Wednesday Thursday Friday Saturday Sunday Varies each week

1st choice _____ 2nd choice _____

- Mornings Afternoons Early evenings
 Every weekend Alternating weekends

Special Skills: Please check as many that apply.

- Animal Care Arts & Crafts Calligraphy Carpentry Clerical Computers
 Fund Raising Graphics Photography Public Speaking Teaching Telephone
 Veterinary skills Writing Other skills, please explain

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How did you hear that we have volunteer opportunities? Please check as many that apply.

Staff Volunteer Newspaper HCNC Website Nature News Other

If other, please explain _____

Are you a HCNC member? Yes No

Volunteer Experience: _____

Commitment Statement: If accepted as a volunteer:

- ♦ I offer my services with the understanding that it is as a volunteer.
- ♦ I will fulfill my time commitment and will notify my supervisor if I must be absent or will be late.
- ♦ I will accept training, standards, and supervision.
- ♦ I will adhere to the Nature Center's policies and procedures.
- ♦ I will notify my supervisor or volunteer coordinator if I can no longer fulfill my commitment or if I would like to volunteer in another capacity.

Signature _____ Date _____

If applicant is under 18 years old:

Parent or Guardian's Signature: _____ Date: _____

Emergency Contact Information

Name _____ Phone _____ Relationship _____

For office use only:

Start Date _____ Area _____

Training Dates _____ Position _____

Hold Harmless Required Yes No If yes, date signed _____

Trainer _____

Other Assignments _____

Volunteer Database _____ Volunteer Assignment Sheet _____

Marketing Database _____ Volunteer Newsletter _____