



BERMUDA ZOOLOGICAL SOCIETY
SUPPORT CHARITY FOR BERMUDA AQUARIUM, MUSEUM & ZOO

Charity #179



JUNIOR VOLUNTEER PROGRAMME APPLICATION FORM 2020-2021

(This is a yearly programme different from occasional Youth Volunteering at BAMZ)

Date: _____

Name: _____
Last First Middle Initial

Address: _____
Street Parish Postal Code

Phone: _____
Home Cell Phone (Personal)

Email Address (personal): _____ **Date of Birth:** _____

School: _____ **Grade:** _____

Interests & Skills: Please list or describe your interests, skills and teams that you are involved with, in and out of school time. (Hobbies and skills)

Emergency/contact Info- Please list two contacts:

Name: _____ **Relationship:** _____

Telephone: _____ **Email:** _____

Name: _____ **Relationship:** _____

Telephone: _____ **Email:** _____



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Medical Conditions:

Asthma: Yes No

Allergies:

Date of last Tetanus Vaccination:

List previous work and volunteer experience:

Do you have previous animal care experience?

Why do you want to become part of the Junior Volunteer Programme?

Reference: Please provide the name of one teacher from your school who would act as a character reference.

Please check the morning that you are available to volunteer.

Saturday _____

Sunday _____

Please read and sign: I understand that I will be required to volunteer one morning every weekend for a full school year and attend learning modules or field trips throughout the year. I also understand that I will be responsible to make up any hours which I miss in order to complete the programme.

Signature:

Date:

ALL APPLICATIONS SHOULD BE SUBMITTED NO LATER THAT SEPTEMBER 15TH, 2020 FOR CONSIDERATION

Applications can be submitted via email (activities@bzs.bm).

Applications can also be dropped off at the Aquarium Front Desk, attention Dr Alex Amat.

For further information please call 293-2727x 2133