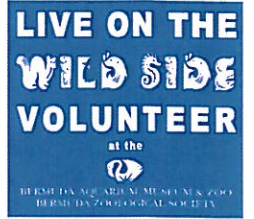




BERMUDA ZOOLOGICAL SOCIETY
SUPPORT CHARITY FOR BERMUDA AQUARIUM, MUSEUM & ZOO



YOUTH VOLUNTEER APPLICATION

(14 — 17 years of age)

Please Circle: Mr. Mrs. Ms. Miss Dr.

Date: _____

Name: _____
Last First Middle Initial

Address: _____
Street Parish Postal Code

Mailing Address: _____
Street Parish Postal Code

Phone: _____
Home Cell Work

Email address: _____ **Date of Birth:** _____ **Age:** _____

A Copy of a photo ID is required with all volunteer applications

Interests & Skills: Describe any skills, interests, or training you may have that would be an asset to volunteer service:

Scuba Qualifications (Advise Level) _____

Emergency Info: (Please list two emergency contacts)

Name Relationship Telephone

Name Relationship Telephone

Medical Info:

Medical Conditions: _____

Allergies: _____

Physician's Name _____ Telephone _____

Student Info:

(For applicants 14-18 years of age)

School _____ Grade _____ Membership # _____

Parent(s) Name(s) _____ Parent's Work Phone _____

Employment Info:

Current Employment:

Company _____ Position _____

My employer offers a: time-off program for volunteers donation matching program

Volunteer employment:

Nonprofit organization _____ Position _____

Personal Info:

Have you ever been convicted of, or pleaded guilty to any crime(s) Yes No

If yes, please give details of any unspent convictions. A conviction will not necessarily exclude you from volunteering. We do consider any conviction in relation to the voluntary position.

Availability:

Please check the boxes below that represent your regularly available hours.

Monday AM PM

Friday AM PM

Tuesday AM PM

Saturday AM PM

Wednesday AM PM

Sunday AM PM

Thursday AM PM

Experiences: Please circle the volunteer area(s) that is of interest to you:

- | | | |
|-----------------------|---------------|------------------|
| Aquarium | Local Tails | Special Events |
| Zoo | Gardening | Turtle Scrubbing |
| Local Tails | Story Telling | Raffle Sales |
| BAMZ Ambassador/Tours | Mailings | Administration |

Parent Disclaimer: *(must be signed by a parent or guardian)*

I have read and understand this application and I give my child permission to be a volunteer with the Bermuda Zoological Society and the Bermuda Aquarium, Museum and Zoo. I accept full responsibility for my child's participation in this programme. Additionally, I give BZS and BAMZ permission to administer emergency medical procedures in the event I cannot be reached.

Parent(s) Signature

Date

Volunteer Disclaimer:

By my signature below, I certify that all answers given by me are true, accurate and complete. I understand that the falsification, misrepresentation or omission of fact on this application will be cause for denial or immediate termination of volunteer position regardless of how discovered. I also agree to immediately notify the Bermuda Zoological Society if I should be convicted of a crime involving dishonesty, breach of trust, controlled substance, sexual misconduct, abuse or violence while my application is pending or during my period of volunteer service.

It is policy of the Bermuda Zoological Society to afford equal opportunity to all volunteers and applicants regardless of race creed, colour, national origin, marital status, gender, sexual orientation or disability.

I understand that I will not be paid for my services as a volunteer, and that filling out an application for the programme does not guarantee acceptance into a volunteer position.

As a volunteer I am aware of all risks attendant upon activities that I undertake and I agree that BAMZ/ BZS has no responsibilities for loss damage or injury sustained in the course of acting as a volunteer.

Applicant's Signature

Date

BZS and BAMZ cannot guarantee volunteer placement.

We will, however, make every effort to match volunteer applicants to volunteer opportunities based on the needs of BZS /BAMZ and the interest and abilities of the volunteer.

Any questions, please contact the Volunteer Coordinator at 293-2727 ext 130

Return application to : Volunteer Office, The Bermuda Zoological Society, P.O. Box FL 145, Flatts FL BX ,Bermuda