



RACINE ZOO VOLUNTEER APPLICATION

*Please fill out this application in its entirety to be considered for the Racine Zoo's Volunteer Program.
Must be age 18 or older. (If under 18, please fill out Volunteer Application instead.)*

DATE: _____

NAME: _____ BIRTHDATE: ____/____/____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

PHONE #: _____ CELL/OTHER PHONE #: _____

EMAIL: _____ (This is the primary way you will be contacted.)

ARE YOU/HAVE YOU EVER BEEN A MEMBER OF THE RACINE ZOO? _____

HAVE YOU EVER BEEN EMPLOYED BY THE RACINE ZOO? _____

WHEN: _____ DEPARTMENT: _____

ARE YOU CURRENTLY EMPLOYED? _____ (If not, put "N/A" or "Retired.")

CURRENT EMPLOYER: _____

JOB TITLE: _____ MANAGER PHONE #: _____

LIST ANY PREVIOUS EMPLOYMENT OR VOLUNTEER EXPERIENCES: _____

LIST YOUR HOBBIES AND INTERESTS: _____

WHY ARE YOU INTERESTED IN VOLUNTEERING AT THE ZOO? _____

HOW WOULD YOUR COWORKERS/PEERS DESCRIBE YOU (Using ten words or less)?

PLEASE DESCRIBE ANY SPECIAL TRAINING/SKILLS YOU HAVE THAT COULD BE RELEVANT TO VOLUNTEERING AT THE RACINE ZOO. Such as:(artistic ability, computer technology, construction/carpentry, culinary, production, gardening, graphic design, foreign language, newsletters/publications, photography/videography, public speaking, marketing, sales, scientific research, vet/vet tech experience, teaching/educating, etc.)

PLEASE RANK YOUR AREA OF INTEREST (1=FIRST CHOICE, 2-SECOND CHOICE, ETC.):

_____ ADMINISTRATIVE/ OFFICE HELP

_____ ANIMAL DIET PREP HELP

_____ EDUCATION PROGRAM OR CAMP HELPER

_____ EXHIBIT INTERPRETATION & GUEST SERVICES

_____ SPECIAL EVENTS/ HOSPITALITY

_____ ZOO BEAUTIFICATION CREW (CLEANING/GROUNDS/HORTICULTURE)

_____ ZOO CHOO TRAIN CONDUCTOR

_____ OTHER: _____

PLEASE LIST 1 REFERENCE WHO ISN'T RELATED TO YOU:

NAME: _____ COMPANY: _____

TITLE: _____ PHONE: _____

HOW DID YOU HEAR ABOUT THE RACINE ZOO'S VOLUNTEER PROGRAM?

IN CASE OF EMERGENCY, CONTACT: _____

PHONE#: _____ CELL/OTHER PHONE #: _____

RELATIONSHIP: _____

LIST ANY PHYSICAL OR MEDICAL LIMITATIONS, INCLUDING ALLERGIES:

VOLUNTEERS ARE NEEDED EVERY DAY OF THE WEEK, INCLUDING WEEKENDS AND EVENINGS. PLEASE LIST YOUR DAY(S) OF PREFERENCE:

____ SUN ____ MON ____ TUES ____ WED ____ THUR ____ FRI ____ SAT

I CANNOT WORK ON _____

WHEN ARE YOU AVAILABLE TO BEGIN VOLUNTEERING AT THE ZOO? _____

PLEASE SEND THIS COMPLETED APPLICATION TO:

RACINE ZOO
ATTN: CONSERVATION EDUCATION
200 GOOLD STREET
RACINE, WI 53402

OR EMAIL: cmeredith@racinezoo.org

You will hear back via email about setting up an interview and the next Volunteer training date(s). If you have any questions please email cmeredith@racinezoo.org or call (262)636-9580.

PHOTO RELEASE:

I hereby give consent to the Racine Zoo, its subsidiaries or affiliates, to any photographs, video, voice recordings taken and any comments or quotes given by me or my children at the Racine Zoo and/or Zoo related events. I also hereby waive any claim that my child might receive compensation for such purposes. I consent and agree that any photographs are the property of the Racine Zoo and Racine Zoo shall have the right to utilize these photos for public relations purposes.

Name _____ Date _____

Signature _____

*The Racine Zoo is a 501c3 non profit organization and pictures and videos are typically used to thank donors for their contributions, media, and educational materials.