



TREEHOUSE WILDLIFE CENTER VOLUNTEER APPLICATION

DATE: _____

NAME _____

ADDRESS _____

CITY _____ STATE _____

PHONE _____ CELL PHONE _____

E-MAIL _____

DATE OF BIRTH _____

Are you a member of TreeHouse?

YES NO

How long will you commit to volunteering at TreeHouse ?

1 MONTH 3 MONTHS 6 MONTHS 1 YEAR LONGER

When are you available?

YEAR-ROUND SUMMER ONLY OTHER _____

How many days a week are you available? _____

What days and times? _____

May we reproduce photos in which you appear in TreeHouse promotional or educational materials?

YES NO

How did you learn about the volunteer program at Tree house?



EMERGENCY INFORMATION

BIRTH DATE _____

GENDER M F

In case of medical emergency, contact:

NAME _____

RELATIONSHIP _____

HOME PHONE _____ CELL PHONE _____

WORK PHONE _____

Do you have a current tetanus inoculation?

YES NO If YES, when was it? _____

Do you have any medical concerns about which we should be aware (allergies, chronic health, physical limitations, etc.)?

PLEASE RETURN COMPLETED APPLICATION TO:

Tree house Wildlife Center, Inc.

23956 Green Acres Road

Dow, IL 62022



Volunteer Hold Harmless Form

NAME _____
ADDRESS _____
CITY _____ STATE _____
PHONE _____ CELL PHONE _____
E-MAIL _____

DATE OF BIRTH _____

In consideration of your acceptance of my volunteer participation with TreeHouse Wildlife Center, I hereby- for myself, my heirs, executors, administrators and assigns waive and release all claims for damages, which I may hereafter accrue, against the TreeHouse Wildlife Center, its sponsors, agents representatives or assigns. This waiver and release applies to any damages which may be sustained and suffered by me in connection with my association with or participation in the volunteer program at TreeHouse Wildlife Center.

I further acknowledge that I have been sufficiently informed by TreeHouse Wildlife Center of the laws, rules and regulations under which the Center operates; and that I will abide by those laws, rules and regulations.

I have been informed and understand the risks associated with rabies and other diseases in wild animals. If any animal under my care inflicts an injury upon a human, I will report the incident to TreeHouse Wildlife Center immediately and will abide by all pertinent policies and regulations.

I attest that I have received a tetanus shot within the past 10 years, and I understand that, in the event of an injury, I shall receive a booster shot if it has been more than 5 years since my last tetanus shot. I will do so at my own expense

I attest and verify that I have been sufficiently informed of the risks involved in the program and that I will be sufficiently trained to participate in this program.

Signature of Volunteer _____ Date _____

Signature of Parent (If volunteer is under age 18) _____ Date _____

Signature of Witness _____ Date _____



Volunteer Policies

- All volunteers must attend an orientation training, with a staff member or senior volunteer trainer, before beginning their service.
- All volunteers must have a Signed Hold Harmless and Insurance Waiver on file before their service.
- Volunteers are asked to keep current emergency contact names and numbers on file. Please notify a staff member when/if changes need to be made
- All volunteers will undergo a two-month trial and evaluation period before they are considered a full-fledged volunteer. TreeHouse reserves the right to terminate the volunteer contract at any time.
- All volunteers must have had a tetanus shot within the last 10 years (5 years if you are injured on site).
- If a volunteer is injured at TreeHouse they agree to notify a staff member immediately.
- In general, volunteers must be at least 16 years of age. Children who are younger and wish to volunteer must be accompanied by an adult at all times.
- All volunteers must abide by the policies of the TreeHouse Wildlife Center and by the Wildlife Rehabilitators' Code of Ethics.
- Volunteers are required to follow instructions and directions given to them by staff members and any supervisors.
- Volunteers are asked to wear their TreeHouse volunteer uniform when working as a representative of TreeHouse - scrubs or shirt, comfortable shorts or pants and closed-toe shoes with tread (prevent slipping in water or mud).
- TreeHouse Wildlife Center requires a minimum commitment of a 2-hour shift per week for 3 months, if you are volunteering to work in rehabilitation and animal care.
- No visitors are to accompany a volunteer unless first having filled out paperwork, a Hold Harmless form, an insurance Waiver and have been interviewed by a staff member.
- No smoking is allowed inside any TreeHouse building at any time.

By signing below, I state that I understand these policies and agree to follow them while serving as a volunteer for TreeHouse Wildlife Center.

Signature of Volunteer

Date

Signature of Parent (If volunteer is under age 18) Date

Note any exceptions to any policies below:

Signature of Volunteer Coordinator

Date



Volunteer Insurance Waiver

Date:

I, _____ understand that working with wildlife is inherently dangerous. I agree to follow TreeHouse's policies regarding all precautions, safeguards and rules.

I have been advised that TreeHouse does not have health insurance coverage for volunteers. If I am injured, my personal health insurance shall pay for treatment as needed.

Failure to carry personal health insurance may result in a restriction of any duties I am able to perform at TreeHouse Wildlife Center.

_____ I DO have personal medical insurance with _____.
(Name of ins. provider)

_____ I DO NOT have personal medical insurance.

Signature of Volunteer Required

Date

Signature of Parent (If volunteer is under age 18)

Date