

## Group Volunteer Application

Please complete the entire volunteer application and agreement, and mail to P.O. Box 3268 Erie, PA 16508. If you have any questions call the Volunteer Department at (814) 864-4091 ext. 1125 or e-mail <a href="mailto:bmoore@eriezoo.org">bmoore@eriezoo.org</a>.

	Group Contact Information
Contact Name:	Date of Application://
Address:	
	Zip:
Home Phone: ()	Best time to call:
	_E-mail address:
Are the members of your group current	ntly students? YES NO List School:
How many in your group are under 18 How many in your group are over 18	9 years old? years old?
	ourt mandated service hours? YES NO NO nvicted of a felony: YES NO NO
(The Erie Zoo canno	t accept volunteers that have court mandated service requirements
0	r who cannot obtain a clear background check)
What special skills, talents, interests,	raining or hobbies does your group have?
How did you hear about the Erie Zool	ogical Society volunteer program?

Group	Photo	Release

I hereby freely grant the Erie Zoological Society permission to publish photographs or videos taken of our group for			
editorial, advertising, on-line or commercial purposes.			
Group Contact Signature:	_ Date:		

## **Group Volunteer Opportunities**

Group Volunteer opportunities may include gardening, general grounds clean up, Animal Enrichment projects, Special event assistance and other special projects as assigned. If your group has something in mind please include a description with your application.



423 W. 38<sup>th</sup> St. PO Box 3268 Erie, PA 16508 ● (814) 864-4091 Fax: (814) 864-1140 ● e-mail: bmoore@eriezoo.org

**Erie Zoological Society Volunteer Program** 

## Please have each member of your group fill out this form. Please keep this form with your group contact at all times.

Personal Information		
Volunteer Name:	-	
Volunteer Name:	-	
Volunteer Name:	-	
Volunteer Name:		
Volunteer Name:	-	
Volunteer Name:		
Volunteer Name:	-	
Volunteer Name:		
Volunteer Name:	-	
Medical Insurance		
Claims must be submitted to any other applicable insurance plan first (su personal medical plan), before being submitted to the Erie Zoological Society's policy will pay claims of upon pre-approved volunteer activities.	ciety policy. However, if there is no other	
Are your participants covered under medical insurance? YES \_NO \_		