SPECIAL EVENT VOLUNTEER INTEREST FORM

Name ___________________________________________________________ Date _____________

Address _______________________________________________________________________________________

Home Phone__________________ Cell Phone______________ Email ____________________________

Age (Circle one) 10 – 12 yr 13 – 15 yr 16 – 17 yr 18 + Birthdate ___________________________

Please note: Special Event Volunteers who are 10-12 yrs old must have an adult relative volunteer with them at all times. Adults must fill out a separate Interest Form and send together.

How did you hear about our volunteer program?

___ I am an RHZ member ___website ___brochure ___radio ___newspaper article
   ___friend/relative ___other; ______________________________

Why would you like to volunteer for a Special Event?

I interested in volunteer opportunities for the following Special Event(s).

___ Zootini (Mar 28th) ___ Party for the Planet (Apr. 26th)
___ Mother’s Day (May 11th) ___ Dream Night (May 30th)
___ Garden Tour (Jun 7th) ___ Father’s Day Car Show (Jun 15th)
___ Pumpkin PaZOOla (Oct. 11th) ___ Cookies with Santa (Dec 7th)

Have you ever been convicted for violation of any federal, state, county, or municipal law, regulation, or ordinance? (Do not include misdemeanor or traffic violations) ___Yes ___No
   If yes, explain ____________________________________________________________

I certify that the information of this application is complete and correct to the best of my knowledge. I authorize the Rolling Hills Zoo Education Department to use this information in determining my volunteer placement.

Applicant’s Signature_________________________________________ Date ____________________________

Office Use Only:
Date Received: _____________ Received By: ______________

Please submit your application to the volunteer department:

Mail: 625 North Hedville Rd Salina KS 67401 Fax: 785.827.3738 E-mail: volunteer@rollinghillszoo.org