Volunteer Information Please feel free to attach a resume as well.

Name:	_
Address:	-
Contact Numbers: () ()	_
Email Best Time to reach you: AM	PM
Emergency Contact (in case of emergency):	
1. Name:Address:	_
Phone Number: () Relationship:	_
2. Name:	_
Allergies ?:	_
Are you current with your vaccinations? Yes No (circle) Date of Last Tetanus Shot: Other:	
Which animals interest you the most:	_
What type of work are you most interested in doing during your volunteer time?	
	_

wildlife center? Remember,	o you have that you can bring we need assistance with every management to construction so the feel it applies.	ything, ranging
3	talents? Please list as many sk feel that do not apply - we ma	
Work Preferences: (please of Working in a group	vircle) Working alone	Both/Either
Working Indoors	Working Outdoors	Both/Either
Variety of Projects	Specific Project	
Do you want to be trained for If yes, which species of animal spec	or In-Home Foster Care of ani	mals? Yes No

Release of Liability

I, and my heirs, in consideration of my participation as a volunteer at the Yggdrasil Urban Wildlife Rescue center, hereby release the Yggdrasil Urban Wildlife Rescue center, it's Board of Directors, officers, and owners of the properties involved, from any and all liability for damage to, or loss of, personal property, sickness, injury, or bodily harm, from whatever source, legal entanglements, imprisonment, death, or loss of money, which might occur while volunteering with this organization. Specifically, I release said persons from any liability or responsibility for my physical, emotional, or financial condition, and I will not hold liable Yggdrasil Urban Wildlife Rescue for the actions of any volunteers.

I am aware of the risks of participation, which include, but are not limited to, accidental injury to my person from animal bite or scratch from injured and orphaned animals in care at the wildlife center.

I hereby state that I am in sufficient physical condition to accept the required level of physical activity and am current on all vaccinations required to perform this work. I understand that participation in this organization's activities is strictly voluntary and I freely chose to participate. I understand that the organization does not provide medical coverage for me. I verify that I will be responsible for any medical costs I incur as a result of my participation.

(participant)	
(parent or guardian's signature if under 1	8)
(date)	

Please note that the *Yggdrasil Urban Wildlife Rescue* center is solely volunteer-run and donation-funded and that any legal action directed towards this wildlife center would necessitate the closure of the center and all it's programs, which would result in the death of hundreds of animals yearly and the deprivation of hundreds of children who are inspired by our work.