

Austin Zoo Volunteer Application

Date: _____

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____

Driver's License Number _____ Expiration Date _____

Email: _____

Emergency Contact:

Name: _____

Phone : _____ Relation: _____

Why do you want to volunteer at the Austin Zoo?

Please describe any relevant volunteer, work, or school experience.

How did you hear about the volunteer program at Austin Zoo?

Current Employer: _____

Are you interested in volunteering WEEKLY or BI-WEEKLY? (Circle one)

Please indicate on the chart below when you are available to volunteer.

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
AM							
PM							