

Louisiana Purchase Gardens & Zoo

Volunteer Information Sheet

Today's Date:		LPZS Membership Expiration Date:	
Name:		Are you at least 18 years old? Yes ___ No ___	
Parent or Guardian (if under 18):		Age (if under 18):	
Address:		Home Phone:	
State, City, Zip:		Work Phone:	
E-Mail:		Cell Phone:	
		I prefer to receive call at (check one): ___ Home or ___ Work	
Emergency Contact:		Emergency Contact Phone:	
Relationship:			
Occupation:		Education:	

Availability: How often will you volunteer: (Circle one) Occasionally/ Monthly/ Weekly						
Please check the times you will be available for a volunteer shift. (Check all that apply)						
Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
___ Morning	___ Morning	___ Morning	___ Morning	___ Morning	___ Morning	___ Morning
___ Afternoon	___ Afternoon	___ Afternoon	___ Afternoon	___ Afternoon	___ Afternoon	___ Afternoon
What areas in the zoo do you want to volunteer in?						
These positions do not require a minimum time commitment and are typically weekend assignments, but do require signed waiver below.						
___ Special Events	___ Greeter	___ Grounds	___ Ed Program Assistant	___ Train Gang	___ Other(specify):	

These assignments require a minimum commitment of 20 hours/month for at least 4 months/year and signed and notarized waiver Below.				
___ Docent Interpretations	___ Birds	___ Primate/Nocturnal	___ Reptiles	___ Hoofstock
___ Carnivores	___ Kitchen	___ Percheron Draft Horses		___ Other(specify):

Hobbies & Interests:	
Other Volunteer Activities:	
List any experience with the public, children, animals, gardening, event organization, etc:	
Why do you want to become a Zoo Volunteer?	
Are there any animals that you are unwilling to work with?	
Are there any jobs that you are unwilling to perform?	
What special talents, skills, or abilities do you wish to utilize at the Zoo?	
How did you hear about our Volunteer program?	

Education Curator 318-329-3308 Volunteers@MonroeZoo.com	In consideration of the benefits of being allowed to volunteer at the Louisiana Purchase Gardens & Zoo, I hereby agree to assume full responsibility for any and all risks and for my safety and/or my children's own and do further hereby agree to indemnify, hold harmless, and defend the City of Monroe, Zoo Director and all of their officers, employees, and agents, acting officially or otherwise, from any and all liability (whether by negligence, strict liability, or other fault), and from any and all claims, demands, actions, debts, and attorney fees arising out of, claimed on account of, or in any manner predicated on loss or damage to the property of and injuries to, or death of, any persons whatsoever, which may result from my or my children's participation in activities at the Zoo, and do further hereby waive forever any claims, demands, or actions I or my children may have arising therefrom. Also, if applicable, I understand that my child(ren) 14 to 18 years old will be participants in the zoo's Explorer program.
Thanks for joining us on the "Wild Side!"	Signature _____ Date _____ (Parent signature if under 18)
	Notary _____ Date _____