



4004 East 800 North  
Battle Ground, Indiana, 47920  
P: (765) 567-2265  
F: (765) 567-4299  
W: WolfPark.org

# Volunteer Application

Date: \_\_\_\_\_

First and Last Name: \_\_\_\_\_

E-mail Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

## Mailing Address:

Street: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Country: \_\_\_\_\_ Phone Number: \_\_\_\_\_

## Permanent Mailing Address: (If different from Current)

Street: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Country: \_\_\_\_\_ Phone Number: \_\_\_\_\_

## Education:

Current or Last School Attended: \_\_\_\_\_

City/State/Country: \_\_\_\_\_

Expected Date of Graduation (If applicable): \_\_\_\_\_

Field of Study: \_\_\_\_\_

## Employment:

Employer: \_\_\_\_\_

Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

Position: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

May we call your employer for a character reference?

Yes  No

If no, please explain: \_\_\_\_\_

Contact Name and Phone Number: \_\_\_\_\_

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## Background:

Have you ever been convicted of any criminal offense?  Yes  No

If yes, please provide details: \_\_\_\_\_  
\_\_\_\_\_

Have you ever used a different name?  Yes  No

If yes, please provide details: \_\_\_\_\_  
\_\_\_\_\_

Our park often has children on premises,  
do you have any legal restrictions about being around children?  Yes  No

If yes, please provide details: \_\_\_\_\_  
\_\_\_\_\_

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## References:

List two references, not related, who you have known for at least three years.

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Street: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Street: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Relationship: \_\_\_\_\_

I authorize Wolf Park to contact my references to verify information I have given in this application. I authorize references to provide such information about me. I hereby release and hold harmless from liability any person or organization that provides information. I also agree to hold harmless Wolf Park and all of it's employees. I attest that all of the above information given is true, complete and correct.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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## Emergency Contact:

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Relationship: \_\_\_\_\_

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## Availability:

The Park is open for volunteer help: (Subject to seasons, events and staffing needs)

Mondays – Fridays 9:00 – 5:00

Sunday 1pm – 5pm

Saturdays 11am – 5pm

Fridays and Saturdays 7pm – 9pm

Please indicate potential days that you can volunteer: *(Note this is not a commitment but just provides us with an idea the days and time you can volunteer)*

Mondays \_\_\_\_\_ to \_\_\_\_\_

Tuesdays \_\_\_\_\_ to \_\_\_\_\_

Wednesdays \_\_\_\_\_ to \_\_\_\_\_

Thursdays \_\_\_\_\_ to \_\_\_\_\_

Fridays \_\_\_\_\_ to \_\_\_\_\_

Friday Evenings \_\_\_\_\_ to \_\_\_\_\_

Saturdays \_\_\_\_\_ to \_\_\_\_\_

Saturday Evenings \_\_\_\_\_ to \_\_\_\_\_

Sundays \_\_\_\_\_ to \_\_\_\_\_

## Areas of Volunteering Interest:

Gardening

Admission/Sales

Guided Tours/Public Relations

Work with Children

Maintenance

Office Work

Educational Displays

Animal Care Taking

Special Programs

Other: \_\_\_\_\_

## Getting to Know You:

What attracted you to our Wolf Park Volunteer Program? *Please provide a brief response.* \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Do you have any experiences, knowledge or special skills?

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Are you a member of any clubs, organizations or do any volunteer work?

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

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## Release Statement

The undersigned recognizes and acknowledges that the Wolf Park Volunteer Program may include contact with Non-domestic animals that involves risk of bodily injuries, both known and unknown, including, without limitation, bruises, scrapes, abrasions, infections, broken bones, trauma, fear and mental anguish and property damages, both known and unknown. Further, the undersigned hereby assumes each of the risks described above and releases and discharges claims, demand cost, expenses, attorney's fees, compensation and all consequential or other damages now accrued or hereafter to accrue to or for the benefit of the undersigned on account of or in any way arising out of the participation by the undersigned in the Volunteer Program, specifically including, without limitation, any personal injury or property damage incurred while on Wolf Park property, volunteer residence or in any vehicle belonging to Wolf Park.

The undersigned also agrees that any photographs taken or audio-visual recordings (including film or videotapes) made at Wolf Park will be used only for private non-commercial purposes, and that no other use (whether commercial or non-commercial) of such photographs or recordings will be made without the prior written authorization of Wolf Park. The undersigns further consents to the making, use, and reproduction of Wolf Park or anyone authorized by Wolf Park of photographs, video recordings or film of his/her images while engaged in the Volunteer Program for any purpose whatsoever in connection with Wolf Park's activities, without compensation to the undersigned.

The undersigned acknowledges that he/she has read, and understands and fully agrees to the above.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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