*(Please print & hand-fill or complete electronically – and sign)*

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Today’s date: | | | | | | | | | | | | | |
| Volunteer INFORMATION | | | | | | | | | | | | | |
| Last name: | | | First: | | | | Email address: | | | | | | |
|  | | |  | | | |  | | | | | | |
| Street address: | | | | | Contact phone # (primary): | | | | | | Contact phone # (secondary): | | |
|  | | | | | ( ) | | | | | | ( ) | | |
| Driver’s License/ID #: | | | | | | How Long have you lived in Palo Alto: | | | | | | | |
| Occupation: | | Employer: | | | | | | | | | | | |
|  | |
| Previous volunteer experience: | | | | | | | | | | | | | |
| Please tell us why you interested in volunteering with the Barron Park Donkeys? | | | | | | | | | | | | | |
| Have you had experience with equines in the past? If yes, please describe: | | | | | | | | | | | | | |
| Please describe any education or experience you have with animal care? | | | | | | | | | | | | | |
| Are there any restrictions that may limit your ability to volunteer regularly (family, health, school, transportation, etc.)? | | | | | | | | | | | | | |
| When are you available to volunteer (during week, weekends, etc.)? | | | | | | | | | | | | | |
| **Please list two personal references below:** | | | | | | | | | | | | | |
| 1) Personal reference (name): | | | | | | | | | | | | Reference phone no:  ( ) | |
|  | | | | | | | | | | | |
| 2) Personal reference (name): | | | | | | | | | | | | Reference phone no:  ( ) | |
|  | | | | | | | | | | | | | |
| IN CASE OF EMERGENCY | | | | | | | | | | | | | |
| Name of emergency contact: | | | | Relationship to volunteer: | | | | | Phone no:  ( ) | | | | |
|  | | | |  | | | | |
|  | | | | | | | | | | | | | |
|  |  | | | | | | |  | |  | | |  |
|  | **Volunteer Signature** | | | | | | |  | | **Date** | | |  |

*\*Continue to 2nd page if needed\**