



# Saco River Wildlife Center

238 River Road, Limington, Maine 04049

207-702-1405

## Transport Volunteer Application

As a transport volunteer you are a representative of Saco River Wildlife Center and the State of Maine. You may be subject to a background check as you are likely to enter finder's property and/or home.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Emergency contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Maine Driver's License# \_\_\_\_\_

Are there specific areas you are available to transport? \_\_\_\_\_

\_\_\_\_\_

Special skills and experience? \_\_\_\_\_

\_\_\_\_\_

Current and/or previous volunteer experience:

Organization

Responsibilities

When/How long?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Have you had your: Rabies vaccine Yes/No when? \_\_\_\_\_

Tetanus vaccine Yes/No when? \_\_\_\_\_

Do you have health insurance? Yes/No

All SRWC volunteers are required to be covered under their own health insurance policy.

By applying as a volunteer of Saco River Wildlife Center (SRWC) you agree to hold SRWC, its volunteers and Board of Directors harmless from liability for any injuries, illness or damages that may arise from your volunteer activities.

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

I have read and understand the Transport Volunteer Code of Conduct.

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