



Friends of the Big Bear Alpine Zoo

Docent & Volunteer Application

Date:

Name:	
Mailing Address:	
City:	Zip:
Physical Address:	
City:	Zip:
Home Phone: ()	Cell Phone: ()
Email:	<i>Note: If approved as a Docent, and you have a computer, it is required that our newsletter be sent via email (saves on costs)</i>
Are you at least 18 years or over?	Thursday OR Saturday Classes
Are you currently a member of the Zoo?	FOBBAZ member #:

Emergency Contact

Name:	Phone:
Name:	Phone:

Employment

	Retired? Yes / No
Current Employer? Yes / No	Not Working? Yes / No
Current Employer Name:	Prior Employer Name:
Title or Job Description	Title or Job Description:
Number of Years at Job:	Number of Years at Job:

Educational Achievements

School Name	Number of Years	Degrees	Applicable Coursework
High School			
College			
Other			
Are you currently in school?			

Why are you interested in becoming a volunteer at the Big Bear Alpine Zoo?
Do you have any other volunteer experience?
How did you hear about the docent / volunteer program?
Any Hobbies?

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Any Special Skills?
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What docent & volunteer opportunities might you be interested in?

Cashier – Gift Shop	Kitchen – animal food preparation
Cashier – Snack Shop	Off-site Zoo Programs & Activities
Docent Tour Guide	Zoo Roamer
FOBBAZ Table (information, etc.)	Zoo Special Events
Gardening (planting, watering, etc.)	Don't know yet

If you checked Zoo Special Events above, which ones might you be interested in?

June – Photo Contest	Oct. – Flashlight Safaris
July – Old Time Bear Country Fair	Oct. – Wolf Awareness
August – Blues for the Zoo Concert	Oct. – Boo in the Zoo
Sept. – Ice Cream Safari	
Sept. – Run for the Grizzlies	Don't know yet

Acknowledgment

By submitting this application, you understand that as a volunteer of the Friends of the Big Bear Alpine Zoo (FOBBAZ), you will be expected to uphold the mission of the organization, and to provide customer service with, respect for the animals, and for all the employees, volunteers, and guests.

As a volunteer of FOBBAZ, you agree to follow all guidelines and policies. You also understand that you are required to submit to fingerprinting and a background check. You also give consent for medical attention in the event that you are not able to give consent, or FOBBAZ is not able to reach your emergency contact. You also understand that FOBBAZ has the right to release you from service at any time, just as you have the right to withdraw from volunteer service at any time.

Electronic Signature

Date:	
E-Signature	

(type in your name above)

If you are mailing in your application, please sign below

Signature		Date:	
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Mailing Address: FOBBAZ
 PO Box 2557
 Big Bear City, CA 92314

To Fax Application: (909) 878-4212

General volunteer opportunity questions: (909) 878-4200

Thank you for your interest in the Friends of the Big Bear Alpine Zoo