



Working With **WILDLIFE**

Volunteer Application

Contact Information

Title	
Initials	
First Name	
Last Name	
Nickname	
Gender	
Date of Birth	
Nationality	
ID No (South African Citizens)	
Passport No (International Citizens)	
Country of Issue (Passport)	
Home Telephone	
Work Telephone	
Cell Phone Number	
E-mail Address	
Street Address (Line 1)	
Street Address (Line 2)	
City	
State/Province	
Country of Residence	
First Language	
Other Language(s)	
Marital Status	
Dietary Requirements	
Do you have any medical condition(s)?	
Do you suffer from any allergies and/or asthma?	
Volunteering Dates (Start – End)	

T-Shirt Size

Please specify your t-shirt size:

Small

Medium

Other

Large

X-Large

General Practitioner

Name	
Contact Number	
E-Mail Address	

Tell Us About Yourself

Let us know about your interests and hobbies as well as your strengths and weaknesses.

Previous Volunteer Experience

Let us know if you have had any previous volunteer experience.

Next of Kin (in case of an emergency)

Name	
Relation	
Home Number	
Work Number	
Cell Number	
E-Mail Address	

Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.

Name (printed)	
Signature	
Date	

Our Policy

It is the policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability.

Please be sure to read the “*Working for Rhinos*” terms and conditions (document titled: “Terms and Conditions”) and attach the signed document along with your application.

Thank you for completing this application form and for your interest in volunteering with us.