

Properties Volunteer Application

Contact Information: Today's Date_ Date of Birth_____ **Emergency Information:** Allergies or Medical Conditions_____ Emergency Contact Name_____ Relationship Placement Information: Hours desired per week______ Days Available (please circle) S M T W Th F S Available Start Date_____ End Date (if known)_____ Which of the following opportunities most interest you? Please rank volunteer preference: Land Volunteer Assisting with the routine maintenance on the 325 acre property. **Special Event Volunteer** (Help with special events, and/or other volunteer days.) Other (Please indicate special abilities or skills that you could contribute to the NBS Education Department)

Please answer the following questions completely. Attach additional sheets if necessary.	
Why are you in	terested in volunteering at the Norman Bird Sanctuary?
Please list any r	elevant education or work experience:
What are you h	oping to learn from your experience at NBS?
Will you have regular transportation available to and from NBS?	
To Apply:	Please submit this application to:
Mail:	Properties Department Norman Bird Sanctuary 583 Third Beach Rd Middletown, RI 02842
E-mail: jwhitney	y@normanbirdsanctuary.org