



# UTICA ZOO

ONE UTICA ZOO WAY, UTICA, NY 13501

P: 315.738.0472 F: 315.738.0475

   UTICAZOO.ORG

## GROUP Volunteer Application

**Prior to submitting this form, please make sure you have read and understand the following:**

- All Groups must identify a Group Coordinator that is responsible for the safety and well-being of group members:
  1. To provide coordination and supervision of group while volunteering
  2. To ensure all members adhere to Zoo rules and procedures.
- It is the responsibility of the coordinating group to obtain some type of signed parental consent form for group members under the age of 18 which must be brought to the project by your Group Coordinator who will retain them in case of an emergency.
- The Utica Zoo is a tobacco free zone, smoking or the use of other tobacco products is prohibited.
- The Utica Zoo reserves the right to reject a volunteer for any reason which the Zoo, in its sole judgement, determines will or may affect the best interests of the Zoo. Furthermore, the Utica Zoo reserves the right to withhold the reason(s) for such refusal.

### Youth Groups:

- Minimum of 5 youth and 1 chaperone, maximum of 25 youth and 5 chaperones. Chaperones may NOT be peers.
- All volunteers must be at least **14 years old.**
- There must be a 5:1 youth to adult ratio for anyone under age 18.

### Adult Groups:

- Minimum of 5 individuals and maximum of 25 individuals.

**Group/Organization/School:** \_\_\_\_\_

**Contact Name:** \_\_\_\_\_

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

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

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



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- What date would you prefer? \_\_\_\_\_ Secondary/rain date? \_\_\_\_\_
- Are there any physical, age, or other limitations that we should consider when assigning a project to your group? \_\_\_\_\_
- How did you hear about this volunteer opportunity? \_\_\_\_\_

**Please indicate your group type with the total number of volunteers participating:**

**Youth Group:** minimum of 5 students with 1 chaperone maximum of 25 students with 5 chaperones

Number of participants: YOUTH \_\_\_\_\_ ADULT CHAPERONES \_\_\_\_\_

What is the age range of the youth? \_\_\_\_\_

**-OR-**

**Adult Group:** minimum of 5 individuals and maximum of 20 individuals.

Number of participants \_\_\_\_\_

**Please note: there are no group opportunities that involve working directly with animals.**

**Please fill out and return this form at least ONE MONTH prior to your preferred  
 volunteer date. Thank you!**

The Utica Zoo cannot guarantee volunteer placement. The Zoo will, however, make every effort to match volunteer applicants to volunteer opportunities based on the needs of the Zoo and the interests and abilities of the volunteer.

\_\_\_\_\_  
 Printed name of Group Coordinator

\_\_\_\_\_  
 Signature of Group Coordinator

\_\_\_\_\_  
 Date

Please return completed form to Robin Sullivan at:

One Utica Zoo Way, Utica, NY 13501 Phone: 315-738-0472 Fax: 315-738-0475 Scan/email: [info@uticazoo.org](mailto:info@uticazoo.org)