



VOLUNTEER APPLICATION

Applicant Information: (Please print)

Name (First, MI, Last): _____

Address: _____

Cell/Text Phone _____

Email address: _____

Are you under 18 years of age? ☐ Yes ☐ No If so, adult supervision may be necessary.

Are you a current member of Audubon of Martin County? ☐ Yes ☐ No ☐ Unsure

Emergency Contact

Emergency Contact Name: _____

Relationship: _____

Emergency Contact Phone: _____

Volunteer Opportunities: Please check all volunteer opportunities that interest you:

- ☐ Administrative/Clerical Assistance
- ☐ Art/Graphic Design (for flyers, social media, website)
- ☐ Board of Directors
- ☐ Building & Grounds Care and Maintenance
- ☐ Committee Participation (Conservation, Fiscal/Fundraising, or Membership Committee)
- ☐ Christmas Bird Count
- ☐ Docent at the Possum Long Nature Center (greet visitors, fill feeders, check messages etc.)
- ☐ Educational Activities for Children and Families (Birds & Butterflies, Homeschool visitors etc.)
- ☐ Field Trip Leadership or Assistance
- ☐ Gardening (Invasive/vegetative debris removal, planting, etc.) at Possum Long Nature Center
- ☐ Photo Exhibit/Contest in partnership with the Elliott Museum
- ☐ Social Media/Newsletter Support
- ☐ Special Event Assistance (staffing our booth at events like Firefest, Artsfest, etc.)
- ☐ Volunteer Coordination

Please describe any skills, certifications, volunteer experience, hobbies, or professional experience that you would be interested in sharing that might be helpful to Audubon of Martin County?

Volunteer Availability:

Are you interested in volunteering: ☐ on a regular basis? or ☐ occasionally?

Are you an: ☐ annual resident? or a ☐ seasonal resident?

Any preference to the day(s) you are generally available? ☐ No Preference

☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday ☐ Saturday ☐ Sunday

Any preference as far as time of day? ☐ Mornings ☐ Afternoons ☐ No Preference

Volunteer Acknowledgement and Agreement:

I certify that the information provided in this application is true, accurate, and complete to the best of my knowledge.

By submitting this application, I acknowledge that participation in volunteer activities may involve inherent risks, including those associated with outdoor and environmental activities. I voluntarily choose to participate and assume responsibility for the risks associated with my participation.

To the fullest extent permitted by law, I release, waive, and hold harmless Audubon of Martin County, its directors, officers, employees, agents, and volunteers from claims, liabilities, damages, losses, or expenses arising out of my participation in the volunteer activities, except to the extent caused by gross negligence or willful misconduct where prohibited by applicable law.

Printed Name: _____

Signature: _____

Date: _____

Please return the completed form to:

Mail: Send to the address below, Attention: **Volunteer for Intake Support**

Online: Email the completed form to info@audubonofmartincounty.org

Audubon of Martin County
621 SE Palm Beach Road
Stuart, FL 34994
www.audubonofmartincounty.org
(772) 288-2637