



FAMILY FARM

Intern Application and Release Form

Start _____

Log-in _____

Shift _____

Instructions for the volunteer:

1. Call (503) 220-2449 to check availability and schedule an Interview/Orientation. We have a limited number of Internships.
2. Read and fill out both sides of this form. Then sign it and have your parent/guardian, and your teacher (if applicable) sign the form.
3. Bring this form with you to your orientation/interview, unless otherwise arranged.

NOTE: We MUST receive this form, completed and signed, before you can start your internship.

Please Print

Name of School _____

Name _____ Phone _____

Home Address _____

City _____ State _____ Zip _____

E-mail _____ Date of Birth _____ Gender: M F

Is this Short Term Internship required for school or something you just want to do? _____

Medical Release and Emergency Contact Information

In an emergency, if the parent/guardian or emergency contact cannot be reached, I authorize the Oregon Zoo to transport and/or obtain medical services from any doctor (M.D. or D.O.) for my child.

Parent/Guardian _____ Daytime phone _____

Relationship _____ Cell phone _____

Emergency Contact _____ Daytime phone _____
(other than parent/guardian)

Relationship _____ Cell phone _____

Photo Release

I irrevocably give, grant, and convey to the Oregon Zoo, its successors, agents, and assigns, without compensation to me or the individual named on this form, from any party the absolute right and unrestricted permission to copyright and/or use and/or publish (1) the name, (2) the image or likeness on videotape, and (3) photographic pictures of the individual named on this form, for any purpose whatsoever, including but not limited to the promotion of the Oregon Zoo and its Programs.

General Release

I understand the nature of the Oregon Zoo's Family Farm volunteer program and the activities involved, and state that the individual named on this form is in adequate health to perform the activities and agree that they may voluntarily participate in the program. I do ensure and guarantee to hold harmless the Oregon Zoo, Metro, its staff, agents and representatives from any responsibility for liability whatsoever resulting from the individual's actions, activities, or injury.

I have read and understand the Medical Release, Photo Release, and General Release.

Signature _____ Date _____

(Parent/Guardian if applicant is under 18 years old)

Parent E-Mail: _____



Both sides MUST be completed.

Intern Agreement

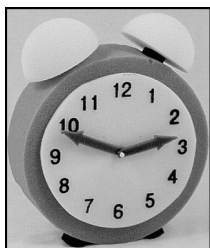
Everyone who works in animal areas at the Oregon Zoo must change their clothes.

This means you must bring a second set of clothes (pants (jeans OK)/long shorts, t-shirt, sweatshirt, socks, and closed-toed shoes with rubber soles and backs) to change into at the zoo before your shift starts. At the end of your shift, you must change back into your street clothes before you leave. Bring a bag to put your street clothes and shoes in while you are working and your work clothes and shoes in when you leave the zoo.

Dress code:

- Name badge must be worn at all times and allows you to get into the zoo for your shift
- All clothes must be clean, with no holes or frayed edges and cannot have any inappropriate images or writing
- Clothes must fit (no super baggy or too tight) and cover (no bare midriffs)
- Jacket for rainy/cold weather
- No dangly earrings, bracelets, or pocket chains

Expectations:



- Be on time
- Be in uniform
- Check in and out on the computer and with staff
- Call if you will be absent
- Be helpful
- Have a positive attitude
- Follow the rules
- Be willing to listen, learn, and participate
- Ask if you don't know
- Be able to work independently

Grounds for immediate removal from the program:

- Using or being under the influence of illegal drugs or alcohol
- Smoking on Zoo grounds (Illegal for persons under 18)
- Stealing
- Use of profane, threatening, or abusive language
- Fighting, pushing or other physical intimidation
- Any form of sexual harassment
- Endangering an animal

I have read and understand the Intern Agreement.



Signature of Student Intern _____ **Date** _____

School Contact Authorization (if applicable)

The student named on this form will be taking part in programming at the Oregon Zoo as part of their school work.

Signature of School Contact _____

Name of School Contact _____ Phone _____

High School _____ Year of Graduation _____