VOLUNTEER APPLICATION FOR TEXAS WILDLIFE ASSOCIATION

Please print or type all information.

Name
First
Middle
Last
Mailing address
Street/PO Box
City
State
Zip
Email address

Phone: Day ( ) __________________________
        Cell ( ) __________________________
        Evening ( ) _______________________

Graduated /Attended College:  Yes / No (circle one)
Degree Achieved: __________________________
Employer: __________________________
Job Title: __________________________

Are you a member of the Texas Wildlife Association?  Yes _____ No _____
Are you willing to volunteer as a:
( place a check beside appropriate areas)

_____ Instructor  _____ General Assistant  _____ Other

Where would you like to volunteer?  Please select all that apply.

_____ Youth Education  _____ Wildlife By Design  _____ Educational Trunks

_____ Distance Learning  _____ Trinity River LANDS  _____ LANDS Intensive

_____ Adult Education  _____ Conservation Initiatives  _____ Texas Youth Hunting

_____ Texas Youth Hunting  _____ Texas Big Game Awards  _____ Public Policy/Advocacy

Please list any skills you feel would be a benefit to TWA:

__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

Please describe other volunteer experiences:

__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

Please describe your wildlife/conservation experiences:

__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

What is your motivation to be a TWA volunteer:

__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

Describe any experiences you have had with natural resources education:

__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
Have you ever been convicted of a felony? Yes ___ No ___ (If yes, please explain.)

Are you certified in first aid or CPR? Yes ______ No ______
If so, please specify in what area ________________________________
Expiration Date ________ Certifying authority (Red Cross/AHA) __________________________

Physical Limitations/Special Requirements or Handicaps/Pertinent Medical Information: ____________________________

SPECIAL MEDICATIONS: YES ____ NO ______. If yes, list generic name of drug(s) and/or medication, along with name and phone number of physician, dosage, consumption rate and interval:

______________________________

PLEASE NOTIFY STAFF IF THERE ARE ANY CHANGES TO YOUR MEDICAL CONDITION.

References: List two persons not related to you who have a definite knowledge of your qualifications. Must include complete address and phone number.

Name ___________________________ Phone number (_____ ) __________________________
Mailing address ________________________________________
Address/PO Box _______ City _______ State _______ Zip ______

Name ___________________________ Phone number (_____ ) __________________________
Mailing address ________________________________________
Address/PO Box _______ City _______ State _______ Zip ______

I fully understand that, in order to protect myself and the Texas Wildlife Association, I may be investigated prior to my appointment as a TWA Volunteer. I authorize contact of listed references. I understand that misrepresentation or omission of facts requested is cause for non-appointment as a TWA Volunteer. If selected as a Volunteer, I agree to abide by the philosophies of the TWA and to fulfill the volunteer responsibilities to the best of my ability.

Signature ___________________________ Date 9/09/2016

If you have any questions or would like further information, please contact us at (800) 839-9453

Or by email to:
North Texas – Robbin Hallford – rhallford@texas-wildlife.org
Central Texas – Brian Robert – brobert@texas-wildlife.org
South Texas – Leslie Wittenburg – lwittenburg@texas-wildlife.org
TEXAS WILDLIFE ASSOCIATION
VOLUNTEER CODE OF CONDUCT

TEXAS WILDLIFE ASSOCIATION MISSION STATEMENT
The Texas Wildlife Association (TWA) was organized to serve as an advocate for the benefit of wildlife and for the rights of wildlife managers, landowners, and hunters in educational, scientific, political, regulatory, legal, and legislative arenas. We are absolutely dedicated to educating all persons, especially the youth of Texas, about the conservation, management, and enhancement of wildlife and wildlife habitat on private land to ensure the preservation of our cherished rural heritage for future generations.

Texas Wildlife Association volunteers shall at all times:

1. Support and promote the TWA mission.
2. Actively participate in and complete TWA program orientation and training that prepares me to satisfactorily accomplish the tasks for which I have volunteered.
3. Disseminate information to promote the understanding of, and appreciation for, the value of our wildlife and natural resources.
4. Use sound biological information in education and outreach.
5. Abide by all applicable laws and TWA program policies, guidelines, and procedures.
6. Accept supervision and support from salaried TWA staff or designated management, volunteers, and understand that I work under the guidance, supervision, and leadership of the TWA staff in charge.
7. Represent the Texas Wildlife Association by conducting myself appropriately to the context and setting at all times, with courteous manners and language, serving as a positive role model, and demonstrating reasonable conflict resolution skills.
8. Be considerate and respect other’s points of views and not disparage the organization, TWA volunteers or TWA staff in communication with others.
9. Dress in a manner that is appropriate for a given TWA program/event.
10. Handle TWA funds and engage in TWA fundraising (when applicable) in an ethical manner.
11. Must complete appropriate paperwork in a timely manner.
12. Conduct myself in a manner that is in the best interest of the TWA program and will not use the volunteer position for purposes of private or personal gain.

With this signature, I acknowledge I have read and understand the Volunteer Code of Conduct and understand that any violation of the above Code of Conduct is grounds for my immediate removal as a volunteer for the Texas Wildlife Association.

_______________________________              ______ ________________________
Volunteer Name (printed)    Volunteer Name (signature)
_____________________
Date

This form must be signed every year and expires on the last day of the last month of each year.
PLEASE READ CAREFULLY AND FILL IN ALL APPROPRIATE SPACES

IN CONSIDERATION FOR THE RIGHT TO PARTICIPATE IN TEXAS WILDLIFE ASSOCIATION/TEXAS WILDLIFE ASSOCIATION FOUNDATION EVENT, I UNCONDITIONALLY RELEASE, INDEMNIFY, AND HOLD HARMLESS:

- TEXAS WILDLIFE ASSOCIATION / TEXAS WILDLIFE ASSOCIATION FOUNDATION AND ALL THEIR OFFICERS, DIRECTORS, TRUSTEES, EMPLOYEES, VOLUNTEERS, AGENTS, INDIVIDUALLY AND COLLECTIVELY (“RELEASED PARTIES”) FROM AND AGAINST ANY AND ALL CLAIMS, DEMANDS, CAUSES OF ACTION AND DAMAGES, INCLUDING ATTORNEYS’ FEES, FOR PERSONAL INJURY OR LOSS EITHER AT OR EN ROUTE TO AND/OR FROM TEXAS WILDLIFE ASSOCIATION/TEXAS WILDLIFE ASSOCIATION FOUNDATION, RESULTING FROM ANY ACCIDENT, INCIDENT, OR OCCURRENCE ARISING OUT OF, INCIDENTAL TO, OR IN ANY WAY RESULTING FROM THE TEXAS WILDLIFE ASSOCIATION/TEXAS WILDLIFE ASSOCIATION FOUNDATION WHETHER OR NOT CAUSED BY ANY RELEASED PARTY’S NEGLIGENCE OR GROSS NEGLIGENCE. I AGREE THAT I, MY HEIRS, SUCCESSORS, AND ASSIGNS WILL NOT MAKE ANY CLAIM OR INSTITUTE ANY SUIT AGAINST THE RELEASED PARTIES. THIS RELEASE IS FULL, FINAL AND UNCONDITIONAL, AND IS GIVEN FOR GOOD AND VALUABLE CONSIDERATION. BUT FOR THIS RELEASE, THE NAMED CHILD OR I WOULD NOT BE ALLOWED TO PARTICIPATE IN THE TEXAS WILDLIFE ASSOCIATION/TEXAS WILDLIFE ASSOCIATION FOUNDATION EVENT. THIS RELEASE IS INTENDED, AND SHALL BE CONSTRUED, TO EXCLUDE THE RELEASED PARTIES FROM ANY AND ALL LIABILITY.

I further acknowledge and understand that no warranty, either expressed or implied, is made by the Texas Wildlife Association/Texas Wildlife Association Foundation or of any roads, buildings, gates or other improvements, and that dangerous conditions, risks, hazards do exist, including poisonous snakes, insects, and spiders; plants to which some persons are extremely allergic, blinds and tree stands, whether or not erected by participant(s); erosion and general condition of the land, both on and off roadways or trails, creating rough, hazardous and dangerous driving and walking conditions; animals, both wild and domestic, that may be diseased and/or potentially dangerous; deep water; persons with firearms and knives; and the use of vehicles. I am aware of these conditions and expressly assume all dangers, risks, and hazards.

In the event that photographs, slides, or video tapes are made of me, I consent to the release of those photographs, slides and video tapes for use in promoting the Texas Wildlife Association/Texas Wildlife Association Foundation, for as long of the Texas Wildlife Association/Texas Wildlife Association Foundation are in lawful operation. Yes ______ No ______

Dated and signed this ____ day of __________________________, 20______.

____________________________________  ____________________________________________
Parent / Guardian Signature          Parent / Guardian Printed Name

____________________________________  ____________________________________________
Volunteer’s signature                Volunteer’s Printed Name

____________________________________  ____________________________________________
Address                         City, State, Zip