



Perth Zoo
Docent Association

Personal Information

APPLICATION TO BECOME A PERTH ZOO DOCENT

PLEASE PRINT CLEARLY IN BLOCK LETTERS

Title: _____ Family Name: _____ Given Name: _____

Date of birth: ___/___/___ Are you a Zoo Friend member? Yes No

Do you have a current Australian Driver's Licence? Yes No

Contact Details

Address: _____

Suburb: _____ Post Code: _____

Telephone (H): _____ (W): _____ (Mobile): _____

E-mail address: _____

Confirm E-mail: _____

Availability

You are required to do two duty days per month, would you prefer (please circle)

Weekdays - Mon Tues Wed Thurs Fri **Weekends** - Sat Sun

Please note: The cost of the course is \$130 and includes your first year's membership.
(Annual membership is at present \$50)

Skills & Experience

Employed full-time Employed part-time Between employment

Studying full-time Studying part-time Retired

Occupation: _____

List other volunteer experience (if any)

Do you enjoy working with:

Children/Families Seniors Overseas Visitors People with Disabilities

Are you reasonably fluent in languages other than English? Yes No

If yes, please specify: _____

Police Clearance

Are you willing for the Docent Association to obtain a Police Clearance on your behalf?

Yes No

Motivation

Why do you want to become a docent? _____



Signature _____ Date ___/___/___

Please turn overleaf

Please write a **brief** response to the following questions: (Your answer should fit on this sheet).

Question 1 What do you think are the attributes of a good tour guide? **and**

Question 2 What do you see to be the value of zoos in today's world?

Question 1 _____

Question 2 _____

Postal Address:

Perth Zoo Docent Association

P O Box 489

South Perth 6951

Attention: Mrs G Chidlow

Email: applications@pzda.org.au

January 2023