

## Life Net Volunteer Application Form

Please complete and e-mail to [dbecker@lifenetnature.org](mailto:dbecker@lifenetnature.org) or mail to Dr. Dusti Becker, Life Net, 2465 Olinda Rd. Makawao, HI 96768.

Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_

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

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Emergency Contact: (name, phone, e-mail): \_\_\_\_\_

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1. Where did you learn about Life Net and the Cloud Forest Birds Project?
2. Why have you decided to volunteer on this Life Net project?
3. What skills and knowledge will you bring to the volunteer team?
4. Are you sufficiently physically fit to help with a tropical field research project? How fit are you? Any concerns?
5. Have you read the project briefing? Any questions?
6. Have you signed and returned the liability release form? Please mail to us ASAP.