



# Community Wildlife Habitat Registration Form

Congratulations on taking the initiative toward starting a community-wide habitat conservation project! By completing this form and returning it to us you can **register** your Community Wildlife Habitat project with the National Wildlife Federation® (NWF). Once registered, your community will begin working toward community **certification** and receive ongoing support from NWF.

To register your community, please complete the following information:

**1. Name your Community Wildlife Habitat Project**

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

**2. Identify a Community Wildlife Habitat Team Leader and recruit at least four individuals to become members of the Community Wildlife Habitat Team.**

Complete the attached *Community Wildlife Habitat Team Members List*.

**3. Register the Habitat Team members as official volunteers with NWF.**

Each team member should complete the *Volunteer Application* and *Image Release Form*.

**4. Set up and maintain a project notebook/binder.**

**5. Research your community.**

Complete **Part I: Community Basics** of the attached form *Community Description and Demographics*.

**6. Develop project goals and vision for 1, 3 and 5 years.**

Review the points needed for each segment of Community Wildlife Habitat certification and determine which activities will work best for your community. See the *Community Wildlife Habitat Goals Matrix* for specific activities and points awarded for each.

**You must also complete a minimum of 40 points (of a possible 70) out of the following activities in order for your community to officially register their project with NWF:**

\_\_\_\_\_ Obtain a map of your community (please enclose a copy) 5 points

\_\_\_\_\_ Complete Part II: Ecological Characteristics of *Community Description and Demographics* 10 points

\_\_\_\_\_ Obtain a letter of support from Community Government Officials (please enclose a copy) 10 points

\_\_\_\_\_ Create a 5 year budget 10 points

\_\_\_\_\_ Develop a plan for keeping all members of the Habitat Team in regular communication 5 points

\_\_\_\_\_ Have one member of Habitat Team become a NWF Habitat Steward Volunteer 10 points

\_\_\_\_\_ Get 5 bonus points if that member of the Habitat Team becomes a NWF Habitat Steward Host 5 points

\_\_\_\_\_ Identify three potential funding sources: 5 points

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ Identify three potential sites for Backyard Wildlife Habitat demonstration gardens: 5 points

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ Plan and organize a kick-off celebration (please enclose a copy of flyer, press release, etc.)

10 points

**Total Points (minimum of 40)** \_\_\_\_\_

Please send:

- This completed Community Wildlife Habitat Registration Form;
- 5-10 pictures of your community (a CD with digital photos is also fine);
- \$25.00 registration fee, to

**National Wildlife Federation  
Community Wildlife Habitat Registration  
11100 Wildlife Center Drive  
Reston, VA 20190-5362**

We cannot return the photos or any other elements of the registration form, so please be sure to keep duplicates for your records. Remember to submit the \$25.00 registration fee (check or money order) to cover our processing and handling costs. Make payment payable to National Wildlife Federation. Please allow 3 weeks for processing.

Questions? Please contact us at: 866-788-9297.

# **Community Description and Demographics**

## **Part 1: Community Basics**

We are excited to learn more about your community! To find the answers to many of these questions, you may need to contact your city hall, local natural resource agency, nature centers, parks, conservation groups, or other organizations in your area. Through your research, you will learn more about how your community is affected by and affects surrounding ecosystems and the wildlife with which you share your community. You will also find the information gathered helpful in shaping your Community Wildlife Habitat project goals.

1. Give a brief description of your community:

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2. Please consider the boundaries of your community and decide to either use the community's name or zip codes to geographically define your Community Wildlife Habitat project area. If your community is an entire county, the county name can also be used to define your community. This will allow NWF to accurately track the total number of certified habitats in your community. Please let us know how you would like your community to be tracked. Choose one.

What is the zip code(s) of your community? \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_,

City and State \_\_\_\_\_

County name (choose only if your community is an entire county)\_\_\_\_\_

3. What is the community size in square miles? \_\_\_\_\_ square miles
4. What is the population of your community? \_\_\_\_\_
5. Please give an estimate of the following in your community:  
# of single family detached homes \_\_\_\_\_  
# of town homes \_\_\_\_\_  
# of apartments/multi-family residences \_\_\_\_\_

# of schools \_\_\_\_\_  
# of businesses \_\_\_\_\_

6. Identify three areas where a public Backyard Wildlife Habitat demonstration sites could be set up (i.e., park, zoo, nature center, library, town hall, etc.):

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7. List the names and contact information for local media in your community that could be contacted for publicizing your Community Wildlife Habitat project (i.e., newspapers, radio, TV, etc.)

Name: _____	Name: _____
Address: _____	Address: _____
City: _____	City: _____
State: _____ Zip/Postal Code: _____	State: _____ Zip/Postal Code: _____
Telephone: _____	Telephone: _____
Fax: _____	Fax: _____

If you can identify more local media sources, please attach their information to this form.

8. Identify potential partners for your Community Wildlife Habitat project. For example, garden clubs, community clubs, local conservation initiatives or other non-profit groups could become valuable resources to your habitat team.

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9. How could you obtain funding to help subsidize the cost or give in-kind support for your community project? Please identify possible local funding opportunities within your community (i.e., government agencies, local foundations, businesses, individual donors, fundraising events, etc).

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## **Community Description and Demographics**

### Part 2: Ecological Characteristics

You may attach additional information if necessary.

1. What watershed is your community in? \_\_\_\_\_

2. Is your community along a migratory path or flyway? If so, please describe.

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3. What are the dominant ecosystems in your community (i.e., desert, mixed deciduous, wetland, etc.)?

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4. What are the top two or three environmental or ecological challenges faced by your community?

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5. Are there any federally-listed or endangered species or state-listed species of concern (i.e., plants, birds, insects, fish, etc.) in or near your community? If so, please list each species and listing status.

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6. What are the problematic invasive non-native species that are displacing or contributing to the decline of native species in your community? Please describe.

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7. Are there any other special ecological or environmental conditions in your community?

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**Please list the members of your Habitat Team in the space provided. You may attach a separate list of additional names and contact information if needed.**

**1. Name:** \_\_\_\_\_  
Organization: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_  
State: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Email: \_\_\_\_\_

**2. Name:** \_\_\_\_\_  
Organization: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_  
State: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Email: \_\_\_\_\_

**3. Name:** \_\_\_\_\_  
Organization: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_  
State: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Email: \_\_\_\_\_

**4. Name:** \_\_\_\_\_  
Organization: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_  
State: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Email: \_\_\_\_\_

**5. Name:** \_\_\_\_\_  
Organization: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_  
State: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Email: \_\_\_\_\_

**6. Name:** \_\_\_\_\_  
Organization: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_  
State: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Email: \_\_\_\_\_

**7. Name:** \_\_\_\_\_  
Organization: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_  
State: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Email: \_\_\_\_\_

**8. Name:** \_\_\_\_\_  
Organization: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_  
State: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Email: \_\_\_\_\_

**9. Name:** \_\_\_\_\_  
Organization: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_  
State: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Email: \_\_\_\_\_

**10. Name:** \_\_\_\_\_  
Organization: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_  
State: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Email: \_\_\_\_\_



**National Wildlife Federation®**  
 11100 Wildlife Center Drive  
 Reston, Virginia 20190-5362  
 703.438.6177  
[www.nwf.org/volunteer](http://www.nwf.org/volunteer)

# **WILDLIFE** Volunteer Application **FEDERATION®**

## Personal Information

\_\_\_\_\_

Last Name First Name Middle Initial

\_\_\_\_\_

Street Address

\_\_\_\_\_

City State Zip Code County

\_\_\_\_\_

Telephone Number

\_\_\_\_\_

Email Address *(Required)*

*Select the volunteer program(s) that interest you.*

### National Volunteer Opportunities

- Habitat Steward Host
- Habitat Steward
- Habitat Ambassador
- Global Warming Ambassador
- Community Wildlife Habitat Team Member

### Behind the Scenes/Office Work *(Only if you are in the Washington DC Metro Area)*

- Volunteer Department
- Human Resources
- Membership
- Development

## Emergency Contact

\_\_\_\_\_

Name Relationship

\_\_\_\_\_

City State Email Address Telephone

## Pertinent Medical Information *(Optional)*

\_\_\_\_\_



## Statement of Volunteer Commitment

I certify the statements made in this volunteer application are true and correct, and have been given voluntarily. I authorize the National Wildlife Federation (“NWF”) to verify, in whole or in part, any information provided on this application. I understand that this information may be disclosed to any party with legal and proper interest, and I release NWF from any liability whatsoever for supplying such information. I understand that I have the right to discontinue my volunteer relationship with NWF at any time for any reason and NWF likewise may discontinue the volunteer relationship with me at any time for any reason. As a volunteer, I understand and agree that I shall not nor shall I expect to receive any form of payment, including cash (wages), benefits, food, clothing, or shelter for talents and services I contribute to NWF.

## Image Release Agreement

I agree that photographs or videos taken of me by NWF, its agents, or other third parties and any photographs or videos that I submit to NWF (the “Images”) may be used by NWF for purposes that support NWF's mission. I give NWF, including its affiliated organizations, the right to use, publish, display, copy, modify, and distribute such images at any time, in any manner or medium now existing or later discovered, including without limitation use in print, internet, television, and mailed promotions. NWF shall not publish my name or address in connection with an image of me without my consent. However, NWF may publish the images with quotations provided or submitted by me. I agree that NWF does not need my consent or approval of finished products, copy, or other matter used in connection with the images, or the use to which the images might be applied.

I also acknowledge that my activities as a volunteer may expose me to risks and dangers too numerous to describe, and that I am aware of the nature of the risks and dangers, and that I voluntarily assume all of the risks and dangers inherent in such undertakings.

I agree to fully release, forgive, and discharge NWF, its affiliated organizations, agents, or others acting on its behalf, and their heirs, assigns, successors and partners, from any liability for: (i) their use of the Images and any blurring, cropping, distortion, alteration, optical illusion, or use in composite form, whether intentional or otherwise, that may occur, including without any limitation any claims for libel or invasion of privacy; (ii) any injury to person or property; as well as (iii) any and all claims or liabilities which may arise or result, directly or indirectly, from my activities as a volunteer.

I have read this document and understand it. My submission to the terms of this Agreement is my free and voluntary act and deed, and I acknowledge that this Agreement shall be binding upon myself and my heirs, legal representatives, and assigns. I have the right and ability to enter into this Agreement, and to grant the rights and furnish all images submitted by me pursuant to this Agreement. I am eighteen years of age or older, and, if acting on behalf of a minor, have every right to contract for the minor in the above regard.

Signature of Volunteer Applicant \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Signature of Parent or Guardian (*if under 18 years old*) \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Please return this form to National Wildlife Federation®. If you have any questions please feel free to contact us at:

National Wildlife Federation  
**Attn: Volunteer Coordinator**  
11100 Wildlife Center Drive  
Reston, Virginia 20190  
Telephone: 703.438.6177  
Fax: 703.438.6468

Please visit our website at [www.nwf.org/volunteer](http://www.nwf.org/volunteer) or email us directly at [volunteermatch@nwf.org](mailto:volunteermatch@nwf.org).

# Background Check

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Volunteers who may work with individuals under the age of 18 MUST submit to a background check.

\_\_\_\_\_ Customer Number

## RELEASE AUTHORIZATION—Applicant Complete the Following

1. In connection with my application for a volunteer position, I understand that an investigative consumer report may be requested that will include information as to my character, work habits, performance and experience, along with reasons for termination of past employment. I understand that as directed by company policy and consistent with the position described, you may be requesting information from public and private sources about my: workers' compensation injuries, driving record, court record, education, credentials, credit and references.
2. Medical and workers' compensation information will only be requested in compliance with the Federal Americans with Disabilities Act (ADA) and/or any other applicable state laws. According to the Fair Credit Reporting Act, I am entitled to know if employment is denied because of information obtained by my prospective employer from a consumer-reporting agency. If so, I will be notified and given the name and address of the agency or the source which provided the information.
3. I acknowledge that a telephonic facsimile (FAX) or photographic copy shall be as valid as the original. This release is valid for most federal, state and county agencies including the Minnesota Department of Labor.
4. Minnesota and California applicants only. If you want a copy of the report(s) ordered, check this box.   
The report(s) will be sent by the reporting agency to you at the address below.
5. I hereby authorize, without reservation, any law enforcement agency, institution, information service bureau, school, employer, reference or insurance company contacted by AVERT, INC. or its agent, to furnish the information described in Section 1. The following information is required by law enforcement agencies and other entities for positive identification purposes when checking public records. It is confidential and will not be used for any other purposes. I hereby release the employer and agents and all person, agencies and entities providing information or reports about me from any and all liability arising out of the requests for or release of any of the above mentioned information or reports.

\_\_\_\_\_  
Please print your full name

\_\_\_\_\_  
Please print other names you have used

\_\_\_\_\_  
Home Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Date of Birth

The following states require sex and race to obtain information: AL, AR, FL, GA, IN, IA, OR, TX, WI.

Male    Female            Asian    Black    Hispanic    White    Other \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Today's Date

Please return to:

National Wildlife Federation • Volunteer Program • 11100 Wildlife Center Drive • Reston, VA 20190