

NAME

ADDRESS

CONTACT PH# & EMAIL

EMERGENCY CONTACT: *FIRST & LAST NAME* / *RELATION* / *PHONE NUMBER*

PLEASE INDICATE ALL AREAS OF INTERESTS

- Gallery
 Grant Writing
 Membership
 Office
 Social Media/PR
 Security
 Gallery Store
 Events
 General Cleaning
 Workshops
 Building Maintenance
 Groundskeeping
 Fundraising
 Other _____
 Performance Space (please list specific abilities) _____

DAYS AND TIMES AVAILABLE (AM-PM):

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday

LIST ANY PREVIOUS OR CURRENT VOLUNTEER EXPERIENCE, WORK POSITIONS, SKILLS, TRAINING & SPECIALTIES:

ARE YOU VOLUNTEERING TO FILL AN HOUR REQUIREMENT? (Y/N) IF SO, HOW MANY HOURS?

PRINT & SIGNATURE _____ DATE: _____

PRINT & SIGNATURE OF PARENT/GUARDIAN (If under 18 years of age):

_____ DATE: _____

RECEIVED BY _____ DATE: _____