



Volunteer Application

Name: _____

Address: _____

Email: _____ Phone: _____

What times are you available to volunteer during the days listed below?

(i.e. morning, afternoon, evenings)

Tuesday: _____

Wednesday: _____

Thursday: _____

Friday: _____

Saturday: _____

What months you are available to volunteer?

What type of volunteering interests you? *Please check all that apply and tell us about any experience you may have in that field.*

- Staffing the information desk ~ Experience: _____
- Special Events ~ Experience: _____
- Art Education ~ Experience: _____
- Exhibition Installation ~ Experience: _____

Are you a licensed alcohol server? Yes No

When complete please return this form to Bryan Kaiser, 516 ARTS Education Coordinator by mail to the address mentioned in the letterhead above, by fax to 505.244.4101.