



Discover! Crew Volunteer Application Form

First Name _____ Last Name _____

Home Address _____

City _____ State _____ Zip _____ Home phone #: _____

E-mail Address: _____ Cell phone #: _____

Occupation/previous volunteer experience: _____

List 2 references that have known you for at least 5 years (no relatives):

Name _____ Occupation _____ Phone # _____

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Have you ever been convicted of a crime? _____ (Background check will be performed.)

Can you speak a second language? _____ If yes, what language? _____

Volunteer Availability

Please select the days/times you are available to volunteer:

Monday Tuesday Wednesday Thursday Friday Saturday Sunday

Mornings Afternoons Evenings Other: _____

Please indicate in which activities you would like to volunteer:

_____ Exhibits _____ Special Events _____ Outreach _____ Administrative

Other: _____

Please indicate special skills or areas of interest in which you would like to volunteer:

_____ Science _____ Math _____ Art _____ Computers

Other: _____

I have read and understand the policies and procedures for serving as a volunteer for the Discover! Children's Museum. I understand that my application is subject to a background check and will provide additional information as required.

Signature

Date

Parent's Signature (if under the age of 18)

Date

Mail completed application to: Discover! Children's Museum, P.O. Box 147, Chehalis, WA 98532