

Volunteer Application

Walker's Point Center for the Arts



Last Name:		First Name:	
Address Line 1:		Address Line 2:	
City, State, Zip:		Home Phone:	
Work/Cell Phone:		Email:	
Emergency Contact:		Emergency Contact Home Phone:	
Relationship:		Emergency Contact Work/Cell:	

Section 1

Why would you like to volunteer at WPCA:

How did you hear about us:

Are you willing to make at least a six-month commitment to the volunteer program: yes no

Previous Volunteer Experience:

Do you have any limitations (heavy lifting, etc):

Section 2

Current Employer/Occupation:

Have you been convicted of a misdemeanor/felony in the last seven years: yes no

If yes, please explain:

Section 3

Which volunteer opportunities are of most interest to you (circle those that apply):

Arts Education	Graphic Design	Gallery Assistance	Fundraising/Arts Administration	Writing
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What skills/experience do you have relevant to your area of interest:

Availability: