



Volunteer Application Form

MS.  MR.  MRS.

NAME

STREET ADDRESS

CITY STATE ZIP

CELL PHONE HOME PHONE WORK PHONE

EMAIL ADDRESS

PREFERRED METHOD of CONTACT:

Cell Phone.  Home Phone  Work Phone  Email

CURRENT MEMBER of CAM RALEIGH:

Yes.  No

EMERGENCY CONTACT:

NAME RELATIONSHIP

PRIMARY NUMBER

PREFERRED AVAILABILITY:

Table with 8 columns (M, T, W, T, F, S, S) and 4 rows (MORNING, MID-DAY, AFTERNOON, EVENING) for availability selection.

INTEREST AREAS:

- Administrative, Development, Marketing + Communication, Admissions/Visitor Services, Education, Museum Store, Artists Gallery, Events, Exhibit Installation, Collections/Curatorial, General Office Work, All of the Above

OTHER NOTES:

Blank lines for other notes.