

Volunteer Application

Please Print

Name: _____ Date: _____

Address: _____ PC _____

EMAIL: _____ Telephone: _____

Date of Birth: _____

Preferred Method of Contact: (Circle one) EMAIL or TELEPHONE

Please Select Areas of Interest

- Class assistant
- Local Events (Show and Shine, Canada Day Etc)
- Docent (Tours Training provided)
- Special Events (BMO KidzArt Dayz, Artists in the Garden, Holiday Homes Fundraisers, Art Auction, exhibition receptions & after parties)
- Marketing (volunteer fair, rec market)
- Prepping Materials for events
- Poster Distribution
- Mailouts
- Shop

Available: weekdays evenings weekends

How did you hear about us?

Word of mouth School Work Volunteer PG Other _____

Personal Information:

Occupation: _____

If retired what did you do before: _____

Previous Volunteer

Experience: _____

Volunteer Application

What Skills, Hobbies, Talents, and Interests do you have:

Languages: _____

Why do you want to volunteer at Two Rivers Gallery?

2 References (excluding relatives)

Name: _____

Organization: _____

Phone: _____

Email: _____

Name : _____

Organization: _____

Phone: _____

Email: _____

Anything else that you would like to share about yourself:
