



Workers Arts and Heritage Centre

Adult Volunteer Application Form

Date: _____
Name: _____
Address: _____
City: _____ Postal Code: _____
Telephone: Home: _____
Work: _____
Cell: _____
E-mail: _____

1. Why are you interested in volunteering with the Centre?

2. What type(s) of work are you interested in doing at the Centre?

- Archival/Collections
- Docent/Interpreter
- Resource Centre
- Exhibit Installation and Maintenance/Building Maintenance
- Special Events
- Visitor Services (Front Desk/Gift Shop)
- Administrative

3. How did you hear about our volunteer program?

Skills

1. Do you speak any languages other than English? (Please Specify)

2. Please describe any relevant previous work or volunteer experience.

3. What other skills, talents, or experiences do you bring to the Centre?

Workers Arts and Heritage Centre/Centre des arts et du patrimoine des travailleurs et travailleuses
51 Stuart Street Hamilton, Ontario L8L 1B5
Tel: 905.522.3003 Fax: 905.522.5424 www.wahc-museum.ca



Local 1281



Workers Arts and Heritage Centre

Availability

- 1. Are you willing to volunteer a minimum of 4 hours per month?
__Yes __No
2. Are you available: __Mornings __Afternoons __Evenings
__Weekdays __Weekends __Holidays

Emergency Contact

Name: Relationship:
Address:
City: Postal Code:
Home Phone: Work Phone:
Cell Phone:

References

Please list two individuals who can be contacted to provide personal and employment references.

Table with 3 columns: Name, Address, Phone Number. Rows 1 and 2 for references.

I hereby agree that all information provided is true and accurate and I give the Workers Arts & Heritage authorization to contact references.

Signature of Applicant: Date:

Office Use Only:

Date received: Interview Scheduled:
Contact made by: