



Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Email: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Your availability (please check all that apply):

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
a.m.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
p.m.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

How many hours would you like to volunteer: \_\_\_\_\_

Volunteer opportunities (please check all that you would be interested in):

- |  |   |
|--|---|
| <input type="checkbox"/> Gallery receptions/openings | <input type="checkbox"/> Aide to classrooms/workshops |
| <input type="checkbox"/> Landscaping                 | <input type="checkbox"/> Receptionist                 |
| <input type="checkbox"/> General office              | <input type="checkbox"/> Other:                       |

Please tell us a little about yourself including any previous work/volunteer experience: \_\_\_\_\_

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Thank you for your interest in volunteering at the Center for the Arts Evergreen!  
 Please submit this for via email to [events@evergreenarts.org](mailto:events@evergreenarts.org) or to:

The Center for the Arts Evergreen  
 P.O. Box 2737  
 Evergreen, CO 80437