

# Elizabethtown Historical Society Volunteer Application

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**Please print**

First Name..... Last Name.....  
Address ..... City/State/Zip.....  
Telephone: Home..... Mobile.....  
Email:.....

**Former work/occupation ..... Most recent employer (optional) .....**

**List previous volunteer experience.....**  
.....

**Skills**

1. ....
2. ....
3. ....

**Volunteer availability: (Circle all applicable)**

Number of Days per week: 1 2 3 4 5

Monday    Tuesday    Wednesday    Thursday    Friday    Saturday    Sunday    No Preference

**In an emergency, notify:**

First Name..... Last Name.....  
Address .....  
City/State/Zip..... Telephone.....  
Relationship.....

.....  
(Signature/Volunteer)

(Date)

*For Office Use Only:*

*Position Volunteering For:.....*

*Start Date:.....*

*Schedule:.....*