



# VOLUNTEER APPLICATION

NAME \_\_\_\_\_ DATE \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE (DAYTIME) \_\_\_\_\_ (EVENING) \_\_\_\_\_

FAX \_\_\_\_\_ EMAIL \_\_\_\_\_

BIRTHDAY \_\_\_\_\_ EMERGENCY PHONE # \_\_\_\_\_

My experience can be best utilized at the Venice Art Center in the following area(s).

- FRONT DESK                       RECEIVING                       DOCENT  
 HANGING EXHIBITS                       RECEPTIONS/SPECIAL EVENTS  
 OTHER-Please Describe \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

What date are you able to start? \_\_\_\_\_

How many hours are you able to devote each week? \_\_\_\_\_

Which hours do you prefer?

- Mornings 9am to 1pm                       Afternoons 1pm to 5pm

Which days are most convenient for you?

- Monday    Tuesday    Wednesday    Thursday    Friday    Saturday

Please complete this form and send to: Venice Art Center/390 Nokomis Ave  
South/Venice, FL 34285/Attention: Linda Larisch, Volunteer Coordinator 941.485.7136