

BEAUSEJOUR PIONEER MUSEUM



Volunteer Application Form YEAR 20____

Name: _____

Address: _____

City/Town: _____ Postal Code: _____

Phone: _____ Email: _____

Valid Driver's License: _____ (yes or no)

AVAILABILITY:

During what hours are you available to volunteer? (Check one)

Morning _____ Afternoon _____ Evening _____

INTERESTS:

Tell us in which areas you are interested in volunteering.

Archives	Garbage Patrol	Wrap-Up Day – Fall
Concessions	Parking Patrol	Set-up / Clean-up - Spring
Tours (Adults / School)	Raffle / Silent Auction	Maintenance

Membership is not required to be a volunteer, however it is appreciated. Membership entitles you to vote at the AGM (full year membership), free entry to the Museum grounds and all too all PVM Events only.

AGREEMENT AN SIGNATURE:

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that my position in this organization is as a volunteer and I will receive no monetary compensation for my time.

Name (print) _____

Signature: _____

Date: _____

THANK YOU FOR YOUR SUPPORT

Please submit form to the Volunteer Director @ pvm_volunteers@outlook.com