



JUNIOR ARTS VOLUNTEER REGISTRATION FORM 9/2018

VOLUNTEER INFORMATION

NAME:
EMAIL:
CELL PHONE:
ARE YOU AN ADULT OR TEEN VOLUNTEER? (CHECK ONE) <input type="checkbox"/> ADULT <input type="checkbox"/> TEEN
HOW WOULD YOU LIKE TO VOLUNTEER? (CHECK ALL THAT APPLY)
<input type="checkbox"/> ASSIST DURING CLASS
<input type="checkbox"/> SETTING UP BEFORE CLASS STARTS
<input type="checkbox"/> CLEAN UP AFTER CLASS
<input type="checkbox"/> HELP ORGANIZING/ SETTING UP ART EXHIBITION (OCT. 14TH)
<input type="checkbox"/> ASSIST WITH MARKETING CAMPAIGN
<input type="checkbox"/> TAKE PHOTOS/VIDEO DURING CLASS OR ART EXHIBITION

IS THERE ANY OTHER WAY YOU WOULD LIKE TO VOLUNTEER TO HELP THE JUNIOR ARTS MINISTRY? IF SO, PLEASE EXPLAIN.
HAVE YOU WORKED WITH STUDENTS AGED 8-17? IF SO IN WHAT CAPACITY?
WHY DO YOU WANT TO VOLUNTEER?