

Volunteer Application and Agreement



Date: _____

Name: _____

Address: _____

Phone: _____

Email: _____

Emergency Contact: _____

Medical Concerns you would like the Fort to be aware of: _____

Availability (e.g. once a week, once or twice a month, events, etc): _____

Area of Work:

Bookstore

Gardens

Maintenance

Office/Clerical

Grounds

Interpreter/Docent

Skills or areas of study/research/interest/demonstration: _____

Additional Notes: _____

Signature: _____

Signature of Parent/Guardian if applicant is under 18: _____