VOLUNTEER APPLICATION | Waseca County Historical Society

| Date | | | |
|---|--------------|-------------|---------|
| Name | | | |
| Address | | | |
| Telephone | _Cell | | |
| Email | | | |
| Are you a member of WCHS? | YES | NO | Cł |
| Have you volunteered at WCHS before? | YES | NO | EX |
| Are you currently volunteering elsewhere | ?YES | NO | |
| If so, where? | | | |
| Availability: During which days and hours | are you avai | lable? FLEX | (IBLE – |

Circle available times.

| Sunday | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday |
|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| Morning |
| Afternoon |
| Evening |
| On call |

Why would you like to volunteer at WCHS?

What types of skills would you share as a volunteer?

Do you have public speaking experience? If so, describe.

REFERENCES: Please provide a reference, if you are new to WCHS.

Name ______

Address _____

Telephone _____

Relationship _____



315 2nd Ave N.E. Waseca, MN 56093 507-835-7700 Tues-Fri, 9-5

| Check interests and skills. |
|-----------------------------|
| EXHIBITS/EVENTS |
| Host/docent |
| Research assistance |
| Graphic design |
| Writing/editing |
| Gift Shop Display-Rotate |
| Merchandise |
| Re-enacting/Theater skills |
| Musical skills |
| ADVOCACY |
| Fundraising |
| Speaking |
| Presentations |
| Promotion |
| Board Member |
| PHYSICAL |
| Carpentry |
| Painting |
| Electrical |
| Plumbing |
| Maintenance |
| Gardening |
| COLLECTION |
| Archiving |
| Newspaper Indexing |
| Artifact processing |
| Sewing |
| Textile handling |
| TECHNOLOGY/SOCIAL MEDIA |
| Computers, tablets, etc. |
| Social media |
| Oral history interviewer |
| Typing/transcriptions |
| OTHER: |
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