



Send to: Discovery Station at Hagerstown, Inc.
101 W. Washington St.
Hagerstown, MD 21740

Volunteer / Docent Application

Name _____
Address _____ Apt. # _____
City _____ State _____ Zip _____
Home phone _____ Work phone _____
E-mail _____

EMPLOYMENT

Occupation _____
Employer _____ Phone _____
Employer's address _____

OTHER VOLUNTEER EXPERIENCE

Organization _____ Dates _____
Duties _____
Organization _____ Dates _____
Duties _____

TELL US MORE

Do you speak any other language(s) fluently? _____

References (list two):

Name _____ Phone _____
Name _____ Phone _____

I am available for the following days and times:

(Hours of Operation - **Tues.- Sat.**: 10 am-4 pm / **Sun.**: 2-5 pm / **Mon.**: closed)

Tuesday _____ Wednesday _____
Thursday _____ Friday _____
Saturday _____ Sunday _____

In case of an emergency, notify: _____ Phone _____
Relationship _____ Address _____

I would like to volunteer for: Docent _____ Gift Shoppe _____ Other (specify) _____

Signature _____

Date _____