



APPLICATION FOR VOLUNTEER PROGRAM

The Glens Falls Civic Center is seeking to build a volunteer program to assist in various roles throughout the organization. Please complete the below application for consideration.

PLEASE WRITE CLEARLY IN ORDER FOR YOUR APPLICATION TO BE FULLY CONSIDERED.

First Name: _____ Middle Name/Initial: _____ Last Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Home Telephone Number: _____ Cell Phone Number: _____

Date of Birth: _____

Have you been convicted of a felony in the last 7 years?

Yes _____ No _____

If 'Yes' to the above, please explain here:

Please indicate below which volunteer opportunities are of interest to you:

- Food Service
- Heritage Hall
- Office Assistance
- Ticket Takers
- Ushers

Please indicate your Availability below:

- | | |
|------------------------------------|------------------------------|
| <input type="checkbox"/> Monday | Any time restrictions: _____ |
| <input type="checkbox"/> Tuesday | Any time restrictions: _____ |
| <input type="checkbox"/> Wednesday | Any time restrictions: _____ |
| <input type="checkbox"/> Thursday | Any time restrictions: _____ |
| <input type="checkbox"/> Friday | Any time restrictions: _____ |
| <input type="checkbox"/> Saturday | Any time restrictions: _____ |
| <input type="checkbox"/> Sunday | Any time restrictions: _____ |



Additional Information:

What skills would you bring to this volunteer position? Please explain here:

Please indicate below any/all that apply to you:

- Ability to continuously stand or walk.
- Ability to bend and/or climb stairs frequently.
- Ability to lift up to 10 pounds.
- Ability to serve as a volunteer in a friendly and professional manner.

