

Canadian Clay & Glass Gallery Volunteer Application Form



Thank you for your interest in volunteering at the Canadian Clay & Glass Gallery. We would like to learn more about you so that we can match your interests and needs with ours. Please take a few moments to tell us about yourself. When complete, please return the form to Kyla Wright by email to kyla@theclayandglass.ca or mail to the address at the bottom of this page.

Name: _____

Address: _____

City: _____ Postal Code: _____

Phone: _____

Email: _____

Emergency Contact Name: _____

Relation to you: _____

Telephone: _____ Work: _____

Have you had any previous volunteer experience? Yes No

If yes, please list the organization(s) and volunteer position(s).

What are some of your educational achievements, skills and hobbies?

What employment experience do you have which might prepare you for certain areas of volunteer work at the Gallery?

Do you have a health condition that would restrict or limit you from doing certain kinds of work?

Yes No

If yes, what kind(s) of work would you like to avoid?

Please check the volunteer opportunities that interest you:

Reception Desk/Greeter	Docent, Education Program*
Gallery Shop (Retail)	Curatorial (Research, Archives, Artwork Installation)
Special Events (Openings, Gala)	Administration/ IT

***a police check may be required in some areas of the Education Program and if clear, will be reimbursed**

What days of the week are best for you to volunteer?

Mon. Tues. Wed. Thurs. Fri. Sat. Sun.

What time of the day would you prefer?

Morning Afternoon Evening

How did you hear about the Volunteer Program?

Please list at least two references you approve us calling.

Name	Organization/Position	Phone Number
1. _____	_____	_____
2. _____	_____	_____

Your Signature _____ **Date** _____

Gallery Signature _____ **Date** _____