



MINNESOTA
MARINE ART
MUSEUM

800 Riverview Drive
Winona, MN 55987
(507) 474-MMAM (6626)
minnesotamarineartmuseum.org

Volunteer Information Form

Today's Date: _____

Name: _____
(Last) (First) (Middle Initial)

Address: _____
(Street) (City) (State) (Zip)

Telephone: () _____ Email _____

Date of Birth: _____ (month, day, year)

I heard about the Museum's Volunteer Program from: _____

Type of volunteer work in which I would be interested: (Please check all that apply.)

- Docent
- Gallery Attendant
- Family Programs Assistant
- Greeter
- Events Assistant
- Administrative Help (when needed)

My availability to volunteer would be: (Please check all that apply.)

- Day
- Evening
- Weekend

Are there specific days of the week and/or times that are best for you? _____

Please list any past / current volunteer experience: _____

What are your areas of interest / hobbies? _____

Are you currently working? _____ If yes, where? _____

Is there anything you'd like to add? (area of education, foreign language, hobbies, etc.)

Emergency Contact: _____
(Name) (Relationship)

() _____
(Contact's day phone with area code)

() _____
(Contact's evening phone with area code)

Volunteer Interest

Please return completed form to: Minnesota Marine Art Museum
800 Riverview Road
Winona, MN 55987

Thank You!