



Volunteer Application

Name _____

Last

First

Middle Initial

Address: _____

City

State

Zip code

Preferred telephone number: _____

Have you ever been a docent before? Y N

Have you ever worked or volunteered for a non-profit? Y N

Fields of Interest: please check one or more of the following

Admissions Desk _____

Collections/Archaeology _____

School Tours _____

Special Events _____

Historic Photographs/Archives _____

Other _____ (please describe)

Please list the times you are available:

Please bring the application in person to the museum or email it to lostcity@nevadaculture.org

