

Reston Museum

Volunteer Application Form

I. General Information

Name: _____ Date: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

E-mail: _____

II. Emergency Contact Information

Name: _____ Phone: _____

Relationship: _____

III. Schedule Information

(Museum hours: V ^•-Fri and Sun 12pm to 6pm; Sat 10am to 6pm)

Wednesday (check one):	Morning	Afternoon	Evening
Thursday (check one):	Morning	Afternoon	Evening
Friday (chek one):	Morning	Afternoon	Evening
Saturday (check one):	Morning	Afternoon	Evening
Sunday (check one):	Morning	Afternoon	Evening

I am available for fill-in at the front desk when needed

Additional Scheduling Comments: _____

IV. Volunteer Interests

(Select all that apply)

Administrative Work	Exhibit Curator	Presentations
Advisory Board	Fundraising	Project Coordination
Community Histories of Reston	Grant Writing	Research Analyst
Collections	Institutional Development	Special Events
Community Outreach	Leading Walking Tours	Web Development
Computer/Database Work	Liaison to GMU	Writing Articles
Education Coordinator	Merchandising	
Event Coordinator	Museum Shop/Docent	

Other: _____

Complete this form using Adobe Acrobat™, save as a PDF and email to restonmuseum@gmail.com

OR

Print completed form and mail to: **Reston Historic Trust and Storefront Museum**
1639 Washington Plaza, Reston, VA 20190