

Volunteer Application

Name:	Phone: HmCell
Address:	City:
State: Zip:	Email:
Month and Day of Birth:	
Emergency Contact: Name	
	Telephone Number
Area(s) of Interest: Check	all that Apply
Greeter Admin	istration Tour Docent Education Gift Shop
Garden Storytin	meGallery Host Special Events (must participate in other area as well)
Are you able to commit to t	the minimum of 5 hours per month? YES NO
Are you available on short notice? \square YES \square NO	
Can we put you on a substitute list? \square YES \square NO if so, in what area	
	ys and fill in time available: Monday Tuesday
☐ Wednesday	□ Thursday □Friday
Personal/Professional/Educ	☐ Sunday Applicable
1 cr sonal/1 rolessional/Educ	ational Experience.
Special Applicable Skills: _	
Do you speak a language other than English?	
How did you hear about our program?	
Are you a member of the Casa? \square YES \square NO	
Please consider membership to the Casa to help us administer this volunteer program, preserve our historic	
treasure, and provide activities of enrichment for all ages.	
X	Today's Date
Volunteer Signa	ture

Please return to Lisa Harden, Volunteer Manager harden@casaromantica.org