

Volunteer Application

Volunteer Contact Information

.caa, s balo			
Name	Date of Birth		
Street Address	S		
	CITY	STATE	ZIP
Home Phone		Cell Phone	
E-Mail Addres	S		
Occupation			
School/Colle	ge	Grade/Y	'ear
,	e: painting, cerami	ics, cleaning, organizing, sorting	, coloring, cutting, mosaic work
yrouting, and/o While most of o veekends and	r helping finish a co ur work is done durii evenings on an "on	ommunity/public art project. ng the week, we do have the o	
yrouting, and/o While most of o veekends and	r helping finish a co ur work is done durii evenings on an "on	ommunity/public art project. ng the week, we do have the o	

	Mornings	Afternoon	\square I can do weekends as needed
Monday			☐ I can do evenings as needed
Tuesday			
Wednesday			
Thursday			
Friday			
ansportation			
Driving myself	Driven b	y parent/guarc	lian Taking public transport Other
arent/Guardian In	nformation (fo	or volunteers und	er the age of 18):
arent/Guardian Name:			Home Phone:
reet Address:			Cell Phone:
ty, State, Zip			E-Mail Address:
			Occupation:
mergency Contac	ct:		
lamo			Relationship
ame ome Phone			Cell Phone
any of its publicat		edia for all edu	o use and publish my likeness and photograph in cational and promotional purposes without
Email this comp Art with a Hed		<u>monica@artwi</u>) Falls Rd •	thaheart.net or print and mail to our offices: Mill No. 1 • Baltimore, MD 21211
or Office Use Only: CC DS	Conto	act:	IV: Dispo:
03 MO update:		ć	s MO update: