



## Volunteer Application

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Driver's License #: \_\_\_\_\_ Sex (M/F): \_\_\_\_\_ Age: \_\_\_\_\_ D.O.B.: \_\_\_\_\_

**Have you volunteered with Music in the Mountains before?**

Yes       No      If yes, since when and in what capacity? \_\_\_\_\_

**When are you interested in volunteering with Music in the Mountains?**

Occasionally       Year-round       Summer Festival and/or Conservatory  
 Other availability: \_\_\_\_\_

**Music in the Mountains has a variety of exciting year-round options for volunteers. Please check the options that appeal to you:**

- |  |   |
|--|---|
| <input type="checkbox"/> Office help (clerical filing, answering phones, data entry, etc.) | <input type="checkbox"/> Ushering during the Festival and/or Conservatory |
| <input type="checkbox"/> Distribute posters around town                                    | <input type="checkbox"/> Performance set-up                               |
| <input type="checkbox"/> Mailings  | <input type="checkbox"/> Goes to School events                            |
| <input type="checkbox"/> Group Projects  | <input type="checkbox"/> Other: _____                                     |
| <input type="checkbox"/> Special Events  |   |

**Check all that you've had experience with:**

- |   |   |
|---|---|
| <input type="checkbox"/> Music/ instruments         | <input type="checkbox"/> Technical support        |
| <input type="checkbox"/> Fundraising/ grant writing | <input type="checkbox"/> Creative/ arts           |
| <input type="checkbox"/> Special event planning     | <input type="checkbox"/> Hands-on/ physical labor |
| <input type="checkbox"/> Culinary/ bartending       | <input type="checkbox"/> Other: _____             |

**Educational Background:**

High School: \_\_\_\_\_ Grade Completed: \_\_\_\_\_ Year Graduated: \_\_\_\_\_

College: \_\_\_\_\_ Degree: \_\_\_\_\_ Year Graduated: \_\_\_\_\_

Present Occupation: \_\_\_\_\_ Business Name: \_\_\_\_\_

**List Work Experience:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Describe any other volunteer experiences you have had:**

\_\_\_\_\_  
\_\_\_\_\_

**List any other special skills or interests (languages, hobbies, etc.):**

\_\_\_\_\_  
\_\_\_\_\_

**Why do you want to volunteer for Music in the Mountains?**

\_\_\_\_\_  
\_\_\_\_\_

**List two references:**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

**In case of emergency, please contact:**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

**Have you ever been convicted of a felony?**

Yes  No If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

As a volunteer, you are NOT covered by Music in the Mountains' Worker's Compensation program. You are urged to have your own health insurance in the event you are injured while performing your volunteer duties.

I acknowledge that the above information is accurate. I understand that falsification of information will void this application or lead to dismissal. The above provided information is confidential and will only be used for organization's purposes.

**I authorize Music in the Mountains to verify this information and conduct a background check and/or require that I get fingerprinted, if needed. If requested to do so, volunteers are encouraged to pay for this process as a donation to the organization. However MITM will cover these costs, if needed.**

Volunteer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Thank you!**