

Volunteer Interest Form

Name:			
Address:	City:		Zip:
Home phone:	Cell p	hone:	
Email:			
In case of Emergency, please not	ify:	Ph	ione:
Do you have any physical limitations services:			
Note: Limitations will not necessaril determine if we can make an accom	y prevent you from w		
Committee/Board work	Set up exhibits c Events	or displays	ing? (Check all that apply.) Collections work Programs
If you checked "Programs", can y	ou provide service	s on a weeken	d? Yes No
Do you have access to the interne	et and are intereste	ed in doing rer	note projects? YES NO
Availability (Please list the hour	s that you are avail Tuesday		_Wednesday
Thursday	Friday		Saturday
Do you prefer to volunteer: We	ekly Monthly	Seasonally	(Please circle preference)
When are you interested in starti	ng as a volunteer?		
Which skills would you like to use	e in your volunteer	experience?	



As a Beloit Historical Society volunteer I can expect to receive:

- 1. Training appropriate to my volunteer responsibilities. Training is provided for all tasks and projects. Equipment is provided for in-person work. Many remote opportunities are available. Make remote arrangements with Executive Director Donna Langford as equipment for remote work is not provided by BHS.
- 2. Supervision appropriate to my volunteer responsibilities
- 3. Due consideration as a member of the volunteer service team (the right to report any difficulties or to make suggestions to the staff)

I understand that:

- 1. I will not receive remuneration for my services
- 2. I am expected to comply with the agency's policies and procedures
- 3. I am expected to respect the opinion of others and work as a team player at all times

Signature:	Date:	-
Staff signature:	Date:	_
Please return this form to Donna Langford at:		
Beloit Historical Society		

845 Hackett St. Beloit, WI 53511

Or by email to dlangford@beloithistoricalsociety.com