



ANNISTON MUSEUMS
and GARDENS

VOLUNTEER APPLICATION

Preferred location: ___ Anniston Museum of Natural History ___ Berman Museum
___ Longleaf Botanical Gardens

Contact Information:

Name: _____ DOB: _____

Address: _____

Phone: _____ E-mail: _____

Availability: Most volunteering takes place Monday-Friday with occasional Saturday options. Write in all hours that apply to your desired schedule.

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
9 a.m. - 5 p.m.						

How many hours would you like to volunteer per week? _____

Volunteer Position Interest (check all that apply): ___ Docent/Tour Guide ___ Green Team Groundskeeper ___ Green Team Gardener ___ LAB Tech - Live Animal Building ___ Special Event Team ___ Media & Graphic Design

Please list any physical limitations that should be considered: (some positions require walking, stooping, and lifting)

Personal or professional references:

Name

Phone

1. _____

2. _____

Authorization

By submitting this form I certify that the facts in this application are true, correct, and complete to the best of my knowledge. I understand that I will receive training and supervision from the Anniston Museums and Gardens staff and must abide by the standards and policies of the institution. To perform due diligence in protecting the well-being and safety of those we serve, AM&G reserves the right to perform background checks on any applicant.

Signature

Date