

# Volunteer Application



## Contact Information

Name	
Preferred Name	
Publish My Name As	
Pronoun	
Address	
Phone	
Email	
Preferred Contact Method	

## Availability

Typical availability: \_\_\_\_\_

I am interested in volunteering \_\_\_\_\_ hours per \_\_\_\_\_ (week/month)

## Interests

- |                                                               |                                                        |
|---------------------------------------------------------------|--------------------------------------------------------|
| <input type="checkbox"/> Data Entry                           | <input type="checkbox"/> Exhibits (exp. requested)     |
| <input type="checkbox"/> Research                             | <input type="checkbox"/> Social Media (exp. requested) |
| <input type="checkbox"/> Facilities                           | <input type="checkbox"/> Photography (exp. requested)  |
| <input type="checkbox"/> Library (exp. requested)             | _____                                                  |
| <input type="checkbox"/> Archival Processing (exp. requested) | _____                                                  |
| <input type="checkbox"/> Image Processing (exp. requested)    | _____                                                  |

## Skills and Experience

## Person to Notify in Case of Emergency

Name	
Pronoun	
Address	

Phone	
Email	
Preferred Contact Method	

May we identify you as an LA&M volunteer if emergency contact is needed? (Y/N) \_\_\_\_\_

### Privacy Agreement and Signature

Volunteers of the Leather Archives & Museum may be exposed to records and information which is confidential and/or privileged and proprietary in nature. Such information includes but is not limited to personal information about donors, patrons, and members of the LA&M, and information about collections that are restricted from public access. As a volunteer for the LA&M, you may be permitted access to such records and information in order to perform your assigned duties. By signing below, you agree not to remove from the LA&M or disclose any records and information gained during the course of your duties that might be considered restricted, confidential, private, or proprietary in nature.

Name (printed)	
Signature	
Date	