

Fitzgerald Museum Volunteer Information Sheet

FOR OFFICE USE ONLY

Name:

Address:

Apt. #

Address:

City:

State:

Zipcode:

Telephone Numbers

Daytime:

Evening:

Fax:

email:

Availability

Wed.: 10:00 am – 2:00 pm

Thur.: 10:00 am – 2:00 pm

Fri.: 10:00 am – 2:00 pm

Sat.: 1:00 pm – 5:00 pm

Sun.: 1:00 pm – 5:00 pm

I will work :

On a weekly basis

Once a month

I am flexible, and I can fill in when needed, but I cannot work on a regular basis

I understand that there is no offer of employment or compensation of any type being made on behalf of The F. Scott & Zelda Fitzgerald Museum, Inc. or by any of its duly authorized representatives, and that I am volunteering my time to help the F. Scott & Zelda Fitzgerald Museum, Inc.

Signed-----

Signature of Volunteer

Date-----