



MT. KEARSARGE INDIAN MUSEUM
Education and Cultural Center

One Circle, 1,000 Stories. Experience It!

VOLUNTEER APPLICATION

Today's Date: _____

Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Please indicate the area(s) you are most interested in volunteering with:

- | | | |
|---------------------------------------|--|---|
| <input type="checkbox"/> Education | <input type="checkbox"/> Artifact Cleaning | <input type="checkbox"/> Photography |
| <input type="checkbox"/> Museum Store | <input type="checkbox"/> Special Events | <input type="checkbox"/> Data Entry/ Computer |
| <input type="checkbox"/> Maintenance | <input type="checkbox"/> Gardens & Grounds | <input type="checkbox"/> Other _____ |

Please describe any past volunteer experience, including location and duties:

Please add any additional information you feel the Volunteer Coordinator ought to know:

Thank you for your interest in MKIM's Volunteer Circle!