

Children's Museum of Yuma County
200 S. Main Street
Yuma, AZ 85364



Volunteer Application

Name: _____

Phone Number: _____

Address: _____

Date of Birth (MM/DD/YYYY): _____

Email: _____

Emergency Contact: _____

Relationship: _____

Phone Number: _____

Schedule Availability

Day of Week	AM- 10:00-11:45	PM- 12:00-4:00
Thursday		
Friday		
Saturday		
Sunday		

Are you interested in helping out at museum events?

Are there any subjects or interests you would be willing to share?

Why would you like to volunteer at the museum?

Volunteer signature: _____

If under 18, parent signature: _____