DOWNING
film center
www.downingfilmcenter.com

19 Front St. , Newburgh, NY 12550
Tel: 845.561.3686/800.974.8592
Fax: 845.561.3865
Email: www.downingfilmcenter@gmail.com

VOLUNTEER APPLICATION

Contact Information

Name	
Street Address	
City ST ZIP Code	
Home Phone	
Work Phone	
E-Mail Address	

Availability

During which hours are you available for volunteer assignments?

___ Weekday mornings ___ Weekend mornings
___ Weekday afternoons ___ Weekend afternoons
___ Weekday evenings ___ Weekend evenings

Interests

Tell us in which areas you are interested in volunteering

___ Memberships
___ Publicity
___ Selling Ads & Promotions
___ Clerical
___ Fundraising
___ Cashier
___ Usher/Usherette
___ Newsletter production
___ Volunteer coordination
___ Projection
___ Special Event Planning
___ Archives
___ Other: _____

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Special Skills or Qualifications (Optional) (Use back if more room is needed)

Summarize special skills and qualifications you have acquired from employment, previous volunteer work, or through other activities, including hobbies or sports.

Previous Volunteer Experience (Optional) (Use back if more room is needed)

Summarize your previous volunteer experience.

Person to Notify in Case of Emergency

Name	
Street Address	
City ST ZIP Code	
Home Phone	
Work Phone	
E-Mail Address	

Agreement and Signature

By submitting this application, I affirm that the facts are true and complete.

Name (printed)	
Signature	
Date	

Our Policy

It is the policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability. Thank you for completing this application form and for your interest in volunteering with us.