

Gallery Assistant Manager & Volunteer Coordinator gallery@floridacraftart.org 501 Central Ave., St. Petersburg, FL 33701 727-821-7391 www.floridacraftart.org

Volunteer Application

Name:		
Р	ease include all surnames and maiden name for background check.	
Addres	S:	
City: _	State:	Zip:
Phone	Day () Evening Phone: ()
E-mail	Address:	
	over the age of 18? Yes □ No □ Birthday (month /	
	Parent's Signature is required for appro	oval for volunteers under the age of 18.
l would	like to volunteer in the following areas: (check all that ap	(עומנ
0	Gallery Host/Hostess (Greet patrons, sales with P.O.S, pro	
0	Seasonal Gallery Host/Hostess (Provide extra gallery help	
	gallery hours are extended)	
0	Gallery Display and Maintenance (Help put up and take do	own exhibitions, painting, display changes
	in the retail gallery, etc.)	
0	Special Events (Host/Hostess, serving, bartending, etc., for	fundraisers, gallery hops, lectures and
0	openings) Marketing & Public Relations (Bulk mail, poster distributior	2)
0	Administrative Assisting: (Hands on and/Computer work:	
Ŭ	assist Executive Director, assist Business Manager)	
	ilunteer: Maalda Di Maalda Maadda Oraaist E	where the second second second
	WeeklyBi-WeeklyMonthlySpecial Events Seasonally, please specify season	ventsas needed basis
Please	<u>circle the days you are able to volunteer:</u>	
Monda	Tuesday Wednesday Thursday Friday Saturda	y Sunday (during the holidays only)
	<mark>circle time of day you can volunteer:</mark> (10 a.m. – 2 p.m.) s (between 5:30 p.m. – 9 p.m.)	(2 p.m. – 5:30 p.m.)

Please tell us why you wish to volunteer:

Please tell us any applicable skills you have:

Arts and Mediums	Advocacy/Promoting	Photography
Clerical/Administrative	Leadership	Public Speaking
Computers & Technology	Grant Writing	Adobe Suite
Editing/Writing	Social Media	□ Sales/Retail
Small	Microsoft Word	Training/ Education
Repairs/Maintenance	🗆 Microsoft Publisher	Research
Other:		

Please list all languages you are fluent in with primary language listed first:

Please tell us a little bit about yourself such as: Where else do you volunteer? What is (or was) your current job or focus? What other organizations have you been a part of that you care about? What are your hobbies? What motivated you to volunteer at our gallery?

Emergency Contacts:		
Contact #1	Contact #2	
First & Last Name	First & Last Name	
Home Phone	Home Phone	
Cell Phone	Cell Phone	
Relationship	Relationship	

Signature _____ Date _____

Background checks: Florida CraftArt reserves the right to run background checks on employees and volunteers to protect the interests of Florida CraftArt and its members. Thank you for your interest in Florida CraftArt. If you have any questions, please call (727) 821-7391.