____	Date
☐	Training
☐	Entered
☐	BCI

Community String Project Volunteer Application

Please print and mail or scan/email to CSP, PO Box 513, Bristol, RI 02809, joycebarton@cox.net, or call Joyce at 253-5863

Name _____

Address _____

Home phone_____ Cell _____

Email _____

Emergency Contact Name_____ Phone _____

For which position(s) from the Job Descriptions list would you like to volunteer with CSP? If not included on the list, please suggest others that you feel would be useful to CSP.

_____ _____

Why are you interested in becoming a volunteer with the CSP?

_____

Describe any previous experience working in music:

_____

List present and previous volunteer jobs:

_____

_____

Occupation: _____

May we call you at work? ☐ If yes, phone # _____

Special skills? _____

Availability _____Day of Week/Time_____

Over 18? Yes ☐ No ☐

References:

Name _____ Phone/Email _____

Name _____ Phone/Email _____

_____

Volunteer Signature Date

Filling in this box signifies your agreement to the above.

_____

Received by Date