

Friends of Poplar Hill Mansion

Volunteer Application Form

PERSONAL INFORMATION

Name _____ Miss _____ Ms. _____ Mrs. _____ Mr. _____
Last First Preferred Salutation

Address _____
Street Address City State ZIP

() _____ () _____
Home Cell E-mail

Date of birth _____ Best number/time to call _____
month / day / year (opt.)

What made you decide to volunteer at PHM?

- Friend or Co-Worker
- PHM Publication
- Interest in topic _____
- Museum Volunteer _____
- Other _____

EXPERIENCE

Employed Retired Unemployed Self-Employed Student Other

Current employer _____
Special training or skills _____
Volunteer experiences _____
Hobbies _____
Foreign language proficiency _____
Computer Skills _____

AVAILABILITY

When do you prefer to volunteer:

Weekly Monthly Special Events Specific Exhibit/Event On Call Only

Availability	Mon	Tues	Wed	Thurs	Fri	Sat	Sun
Morning	Closed	Closed					
Afternoon	Closed	Closed					

Emergency contact _____
Name/Relationship Day/Evening/Cell

Reference _____
(No relatives, Name Relationship Day Phone Cell Email please)

Do you know any PHM volunteers? _____

VOLUNTEER INTERESTS

Check all that apply. Job descriptions are available for you to review for specific positions. More positions are available throughout the year based on our exhibit and event schedule, and your specific interests.

Behind the scenes:

_____ Program Support Team (Prepare materials for educational programs, special events and exhibits, and help with clerical needs)

_____ Research & Collections (Work with our curator in the museum and in special settings, sometimes doing special projects or helping with day-to-day tasks; also at specific times with clerical needs and basic receptionist duties; must be 16 or older)

_____ Garden Support (Provide valuable care to the museum's flower gardens; flexible scheduling available)

Guest Services:

_____ Guest Service Assistants (Assist in greeting groups, greet group guests arriving to museum and offer assistance, promote museum memberships, conduct surveys, and more; must be 16 or older)

Public Interaction:

_____ Docents (Share your knowledge of the museum rooms and artifacts by providing guided tours, helping with special events; must be available at least one Sunday a month; training course required; must be 16 or older)

Special Events & Exhibits:

_____ Activity Host (Be a part of the action by helping at one of the many special events and exhibits hosted by the museum; serve food and beverages at one of our Teas/Luncheons, take photos, check in guests, and much more; opportunities vary from event to event)

Outreach:

_____ Speaker's Bureau (Speak to groups/churches/civic organizations/clubs of which you are already a member about the museum and its history and collections.)

_____ Community Programs (Travel throughout the community to various events, fairs, and festivals, such as Third Friday, to assist the Curator interpret history and heritage)

Additional interests _____

Release

In consideration of the publicity benefits to me and of my involvement by the Friends of Poplar Hill, its nominees, agents and assigns and anyone publishing under its authority, unlimited permission to use, publish and republish reproductions of my likeness and voice, with or without use of my name. I hereby agree to hold the Friends of Poplar Hill harmless from any liability arising from the use of my likeness, voice or name in conjunction with this agreement.

Signature_____Date_____

Volunteer Service Agreement

This agreement is entered into between the Friends of Poplar Hill and the PHM Volunteer, _____, to govern volunteer service at Poplar Hill Mansion. The above named agrees as follows: I am a volunteer for the State of Maryland and I am a temporary employee and am not being compensated. I understand that I will receive no payments or remuneration for my volunteer work and that I am exempt from the minimum wage and maximum hour working provisions of the Fair Labor Standards Acts. It is mutually agreed that the above named individual will assist and work as a volunteer with Poplar Hill Mansion during the period that will begin on or about _____ (fill in date that volunteer service begins).

Signature_____Date_____

**Please Return Completed Form to:
Volunteer Program
Friends of Poplar Hill Mansion
117 Elizabeth St.
Salisbury, MD 21801**