



VOLUNTEER APPLICATION

Contact Information

Date: _____ Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Work: _____

Email: _____

Why are you interested in volunteering at HHS?

Describe any interests or skills you could bring to volunteer work:

Would you like to work with the public? _____ Yes _____ No _____ Sometimes

Check any positions you are interested in (*Volunteer positions described below*):

Tour Guide / Docent (April -Dec)

Collections

School Programming (Sept-June)

Marketing / PR / Design

Kid's Archaeology Camp (July)

Office & Clerical

Fundraising & Membership

Special Events

Buildings & Grounds

Other* (specify)

Library & Archives

Tour guide: guide visitors through the historic houses (includes walk-in tours, private group tours, and special topic tours)

School Programming: work with students and help run tours and activities for field trips and/or afterschool programs

Buildings & Grounds: raking, shoveling, general maintenance as needed

Membership/Fundraising: assist with membership mailings and targeted fundraising campaigns

Kid's Archaeology Camp: help with camp digs, set-up and cleanup, group educational activities and crafts, camper supervision

Library and Archives: Transcribe historical documents and help with visitor queries and general librarian duties

Collections: help curatorial staff with data entry, cataloging collections, light cleaning, etc.

Marketing/PR/Design: assist with design of promotional materials, social media posts, website and press release development, etc.

Office/Clerical: filing, database entry, office organizing, bulk mailings etc.

Special Events: help fill needs during specific Special Events held throughout the year

***Other:** brochure distribution, translation, photography, cleaning etc.*

Please write in the hours you are available on each day of the week. If there are days you are not available, please write "unavailable."

Monday	
Tuesday	
Wednesday	
Thursday	
Friday	
Saturday	
Sunday	

How many hours a week are you able to volunteer? _____

Are you available year round, seasonally, or semester only? (Specify) _____

Are there any physical limitations that should be considered? _____

Emergency Contact Information

Name: _____

Number: _____

Background Information

Education (schools and degrees):

Personal Experience:

Volunteer Experience:

References – Names and Contact information

1. _____

2. _____

Thank you for your interest in volunteering at Historic Huguenot Street. We appreciate your willingness to donate your time and skills.

As a volunteer, you may learn more about local history, explore new interests, share your experience, and meet interesting people. Our volunteer needs change throughout the year, some opportunities being short-term and others ongoing and long term.

If you have any questions, please e-mail Kristine Gillespie at kristine@huguenotstreet.org or call (845) 255-1660 ext. 103