



# Volunteer Interest Form – Under 18

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

**Interest:**      Collections/Exhibitions \_\_\_\_\_      Adult programming \_\_\_\_\_  
                          Youth programming \_\_\_\_\_      Docent/tour guide \_\_\_\_\_  
                          Greeter/bookstore helper \_\_\_\_\_      Special event \_\_\_\_\_  
                          Development/office \_\_\_\_\_

**Availability:**      Weekends \_\_\_\_\_      Weekdays \_\_\_\_\_      Hours per week: \_\_\_\_\_  
                          For a specific period of time \_\_\_\_\_  
                          As a “for credit” intern \_\_\_\_\_

**Related experience:** \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_ . (Continue on reverse if needed)

**Emergency Contact:**

Name: \_\_\_\_\_

Relation: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

*I understand that the Moravian Archives (MAB)/Moravian Historical Society (MHS) is not responsible for any accident or injury that may occur during my time as a volunteer. I give permission for MAB/MHS to use any images of me for publicity. I also made MAB/MHS aware of any restrictions that may affect my volunteer experience.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please sign and return this form to Moravian Archives; 41 W. Locust Street, Bethlehem, PA 18018; or to Moravian Historical Society, 214 E. Center Street, Nazareth, PA 18064