

CLATSOP COUNTY HISTORICAL SOCIETY
PO BOX 88 • 714 EXCHANGE STREET
ASTORIA, OR 97103-0088
TELEPHONE (503) 325-2203

Our organization encourages the participation of volunteers who support our mission. If you are interested in volunteering for the Clatsop County Historical Society please fill out this application and email it to **business@astoriamuseums.org**. The information on this form will be kept confidential and will help us find the most satisfying and appropriate volunteer opportunity for you. Thank you for your interest in our organization.

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Employer: _____ Position: _____

Please tell us in which areas you are interested in volunteering:

Flavel House Docent

Events (Old Fashioned Fun and Games, Tea and Plum Pudding, Talking Tombstones, Casino Night...)

Collections Management

Archives

Carpentry

Administrative

Landscaping/Weeding

Other Interests: _____

Indicate days available:

Mon Tues Wed Thur Fri Sat Times available: From _____ to _____

Any physical limitations? _____

In case of emergency contact: _____

As a volunteer of our organization I agree to abide by the policies and procedures. I understand that I will be volunteering at my own risk and that the organization, its employees and affiliates, cannot assume any responsibility for any liability for any accident, injury or health problem which may arise from any volunteer work I perform for the organization. I agree that all the work I do is on a volunteer basis and I am not eligible to receive any monetary payment or reward.

Signature: _____ Date: _____