

VOLUNTEER APPLICATION



Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

I would like to volunteer:

_____ day/s per week _____ day/s per month _____ occasionally

I am regularly available on these days (circle all that apply):

Sunday Monday Tuesday Wednesday Thursday Friday Saturday

I am interested in (check all that apply):

- working at special events/concerts (setup/cleanup)
- building maintenance (including outdoor projects)
- office/clerical work (data entry/copying/filing)
- recording/photography for events and programs
- other: _____

List of current and previous volunteer work (include a brief description of duties/activities and date of service:

I give the Concord Community Music School permission to use my photograph:

- Social Media (Facebook/Instagram) Print Media Website/E-newsletter

I want to volunteer at the Concord Community Music School because:

Please share your musical experience below:

How did you learn about CCMS?

References (Please include at least one professional reference.)

1. Name: _____ Email Address: _____
Phone Number: _____ Relationship: _____

2. Name: _____ Email Address: _____
Phone Number: _____ Relationship: _____

The Concord Community Music School reserves the right to make any checks deemed appropriate as to the suitability of anyone responsible for their volunteer work at the school. All information will be held in the strictest confidence.

Signature _____

Date _____

Please return completed application to:

Kristin Selesnick
Concord Community Music School
23 Wall Street
Concord, NH 03301
kselesnick@ccmusicsschool.org
603-228-1196 ext. 105