



VOLUNTEER APPLICATION

General Information:

Name: _____

Home address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ Email Address: _____

Emergency Contact Information:

Name: _____ Telephone: _____

Do you have any special requirements of which you want us to be aware: _____

Background Information:

Education: _____

Previous Volunteer Experience: _____

Special Interests/Hobbies/Skills: _____

Please circle the areas that you would be interested in volunteering in:

Docent/Guide	Equine	Education	Collections/Exhibits
Gardening	Office	Special Events	Gift Shop

Please list the days and hours you are available to volunteer:

Please return this form to: **LONG BRANCH** *Historic House and Farm*
PO BOX 241
Millwood, VA 22646
Attn. Angie Anderson, Office Manager
Or FAX to 540.837.2289

If you have any questions about volunteering at LONG BRANCH, please call Angie Anderson at 540.837.1856 or E-mail angie@historiclongbranch.com.