

VOLUNTEER APPLICATION

Please send application to:
LBJ Museum of San Marcos
P.O. Box 3
San Marcos, TX 78667

Name _____ Date of Birth _____

Address _____ City _____ State _____ Zip _____

Daytime Phone _____ Evening Phone _____ Mobile Phone _____

E-mail Address _____

Area(s) of Volunteer Interest: Docent (Tour Guide) Special Events
 Exhibit Curation Archives Reference
 Development/Membership Publicity/Marketing Finance
 Education & Interpretation Public Programs Facilities Maintenance
 Oral Histories Conservation Website

Availability: Mon Tues Wed Thur Fri Sat Sun
Circle: am pm am pm am pm am pm am pm am pm am pm

How often would you prefer to volunteer at the museum? _____

Education Background: Name of School Degree Dates Attended

Work and/or Volunteer Experience:

Employer Position Dates City, State Phone Supervisor

Special Skills or Interests: _____
