

VOLUNTEER REGISTRATION FORM

Name: _____ Birth date: _____

School: _____ Grade: _____

Email address: _____

Phone: _____ Alt. Phone: _____

Mailing address: _____

Would you like to be included on our email list? Yes____ No, thanks____



Reason(s) for volunteering at Christianne's Lyceum:

Previous experience working with children/families:

What you hope to get out of your volunteer experience:

Program(s) you want to volunteer for / availability:

Please write a short biography for yourself that will be posted on the volunteers' section of the website. You deserve the recognition!



We are happy to know that you are interested in being a part of Christianne's Lyceum! Your help is greatly appreciated as these programs would not be the same without you. We hope to provide you with good experiences where you may learn and explore some of your skill sets, while working in an environment that is meant to inspire children and families to convene around literature and art. With that said, we also have expectations of you as responsible individuals who understand that volunteering here is a commitment. We depend on you to be here when you are scheduled, or to organize yourself with your peers if you cannot make your commitment due to unforeseen circumstances. Your name and contact information will be added to an exclusive volunteers' contact list so that you can help each other. Please date and sign below to indicate that you have read this and have agreed to the commitments outlined by the Lyceum.

I have read the Policies and Procedures for Volunteering at the Lyceum

Signature _____ Date _____

CHRISTIANNE'S LYCEUM
OF LITERATURE AND ART



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