



CAPE CORAL
MUSEUM OF HISTORY

Cape Coral Museum of History
544 Cultural Park Blvd.
Cape Coral, FL 33990
239-772-7037

info@capecoralhistoricalmuseum.org
www.capecoralhistoricalmuseum.org

Volunteer Application

Date _____

Availability

- Year-Round
 Seasonal From _____ To _____

Contact Information

Name _____
(Last) (First) (For Name Badge)
Street Address _____ City _____ State _____ Zip _____
Phone _____
E-mail Address _____ Birthday _____

Areas of Interest

- Docent (Tour Guide) Office Help Preservation Projects Special Events
 Fundraising Maintenance Gardens Other _____

What skills and experience do you have? _____

Please list any additional languages you speak besides English. _____

How did you hear about us? _____

Emergency Contact

Name _____ Relationship _____
Home Phone _____ Cell _____ Work Phone _____
Street Address _____ City _____ State _____ Zip _____

Parent/Guardian Permission (volunteers under 18 years old)

Printed Name _____
Signature _____
Date _____

Thank you for your interest in volunteering!