



Volunteer Application Form

Please complete this application form if you are interested in becoming a volunteer staff member with Philip J. Currie Dinosaur Museum. Once you complete the form please drop off at the Visitor Services desk at the Museum, or email to visitorservices@dinomuseum.ca

Personal Information

First Name _____ Last Name _____

Address _____

City _____ Province _____ Postal Code _____

Phone Number _____ Email Address _____

Emergency Contact

First Name _____ Last Name _____

Phone Number _____

Volunteer Program

How did you learn about the museum's volunteer program?

Areas of Interest

Please select all areas of interest in which you would like to volunteer:

- | | |
|--|---|
| <input type="checkbox"/> Bonebed Tours | <input type="checkbox"/> Community Outreach |
| <input type="checkbox"/> Fossil Prep Lab | <input type="checkbox"/> Education Programs Assistant |
| <input type="checkbox"/> Docent | <input type="checkbox"/> Dino Bus Driver (requires Class 4 License) |
| <input type="checkbox"/> Visitor Services Host | <input type="checkbox"/> Special Events |
| <input type="checkbox"/> Dinosaur Mascot | |



Time Commitment

Shifts are approximately 2 to 4 hours in length. Please indicate the days and times you are available to volunteer. **Please note that we are not open Mondays from September 1 – May 31.*

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Mornings							
Afternoons							
Evenings							

If you have previous commitments on the days you have specified as available, please forward specifics to visitorservices@dinomuseum.ca

Languages

English French Spanish Other (please list below)

Volunteer Certification and Agreement

I hereby give permission to Philip J. Currie Dinosaur Museum to obtain information regarding my previous employment, education, and/or volunteer background.

I hereby agree to retain a Criminal Record Check including Vulnerable Sector, as well as a Drivers Abstract, if the volunteer position requires it.

I hereby certify that the facts set forth in this volunteer application are true and complete to the best of my knowledge. I understand that if accepted, falsified statements in this application shall be considered sufficient cause for dismissal.

I Agree

Volunteer Signature

Date _____