

Gardner Historical Museum, Inc.

Listed in the State & National Register of Historic Places

On the Trail of History!

<http://www.gardnerhistoricalmuseum.com>

204 W. Main Street, PO Box 442

Gardner, Kansas 66030

913-856-4447

Volunteer Enrollment Form and Questionnaire

Name _____ Date: _____

Mailing Address _____ P.O. Box _____

City _____ State _____ Zip _____

Eve/Weekend Phone _____ Cell _____

E-mail _____

How did you hear about the GHM? _____

Are you currently a GHM member? Yes No

Driver's License # _____ State _____ Exp. Date _____

Have you been convicted of a felony? Yes No If yes, when and what type of felony:

Please list any other community agencies where you currently volunteer: _____

IN CASE OF EMERGENCY, CONTACT:

Name _____ Relationship to You _____

Daytime Phone _____ Evening/Weekend Phone _____

“As a Gardner Historical Museum volunteer, I understand that I am not an employee of the Gardner Historical Museum. I agree to serve without compensation, and to hold the Gardner Historical Museum harmless for injury while serving as a museum volunteer. I certify by my signature below that all of the information listed on this sheet is correct.”

Printed Name of Volunteer _____ Date: _____

Signature of Volunteer _____

Thank you for enrolling as a volunteer at the Gardner Historical Museum.

Signature of GHM Coordinator: _____ Date: _____

*****Please complete the back of this form.*****