



## NEW This Year: Junior Volunteer Program at the Charles M. Schulz Museum!

Children who are 12 and 13 years old can now become Junior Volunteer helpers in our winter, spring, and summer classes. Junior Volunteers must attend a required training, and, if chosen, select 2 or more classes in which to help during the year. Junior Volunteers will receive training, mentoring, reviews, evaluations, a volunteer t-shirt, and the chance to develop leadership skills while working with younger campers.

To apply, complete the form below and return by mail, in person, or by fax, with a non-refundable application fee of \$30 for members or \$50 for non-members.

Applicant's name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone #(s): \_\_\_\_\_

Email address: \_\_\_\_\_

Birth date: \_\_\_\_\_ T-shirt size: Youth Large, Adult Small, Adult Med

Please list any special skills or experience you have related to volunteering at the Charles M. Schulz Museum. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

What are some of your hobbies or interests? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Have you taken classes at the Schulz Museum before? Yes or No

If yes, please list some of the classes you have taken: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Does your school require community service? Yes or No

If yes, how many hours are required: \_\_\_\_\_

*Please continue on the back*

Why do you want to be a Junior Volunteer at the Schulz Museum this summer? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name of Parent or Guardian: \_\_\_\_\_

Parent/Guardian phone #: \_\_\_\_\_

Parent/Guardian email: \_\_\_\_\_

Personal Reference (for example a teacher, adult friend, neighbor who can tell us about you)

Reference name: \_\_\_\_\_

Reference phone #: \_\_\_\_\_

Relationship to you: \_\_\_\_\_

I understand and agree that Junior Volunteers are required to attend a group interview and training to be scheduled and to observe agreed-upon time schedule; be prompt and reliable in reporting for duty; follow prescribed procedures of job performance; notify the Museum as early as possible if unable to report for duty; understand that irregular attendance, poor performance or failure to cooperate with the Museum's policies may be interpreted as a volunteer's desire to resign. I also understand that the Charles M. Schulz Museum reserves the right to dismiss a volunteer at any time and reject an applicant deemed unable or not yet mature enough to perform the Junior Volunteer tasks.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please return this application with check made payable to the Schulz Museum or credit card payment of \$30 for members, \$50 for non-members to the address below.

Museum Member (circle one): Yes or No                      Application Fee: \$30 or \$50

Credit card (circle one): Visa   MC   Amex   Discover

Card #: \_\_\_\_\_ Exp Date: \_\_\_\_\_

Name on Card: \_\_\_\_\_ CVV: \_\_\_\_\_

Signature: \_\_\_\_\_

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