

I am interested in becoming a volunteer at the Zanesville Art Center:

Name: \_\_\_\_\_

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

City/State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: ( \_\_\_\_\_ ) \_\_\_\_\_

I would like to volunteer my services in the following area(s): (You may select more than one.)

Information Desk                       Docent                       Hospitality

I would prefer assignments on the following day(s): (You may select more than one.)

Monday                                       Friday  
 Tuesday                                       Saturday  
 Wednesday                                       Sunday  
 Thursday

I would prefer assignments during the following time period(s). (You may select more than one.)

9 a.m. - 11 a.m.  
 11 a.m. - 1 p.m.  
 1 p.m. - 3 p.m.  
 3 p.m. - 5 p.m.  
 Other (specify): \_\_\_\_\_

Comments:

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Please mail to: ZANESVILLE ART CENTER  
620 Military Road  
Zanesville, OH 43701