## **Waterworks 2024 Summer ARTventures Volunteer Application**

Volunteer's Name_			Date			
Mailing Address	Street/ PO Box		O'th.	State	Zip	
	Street/ PO Box  Cell					
nome Phone	Ceii		=[111811			
School		_ Grade	Counselor/Art Tea	cher		
PLEASE CIRCLE	WHICH FORM OF COMMUNICA	ATION IS MOST	CONVENIENT FO	PHONE / EMA	IL / TEXT	
Parent/Guardian* (r	required <i>if under age 18</i> )		Name			
radicos (il dilicicii	t)Street/ PO Box		City	State Zip		
Home Phone	Cell		Email			
PLEASE CIRCLE	ONE: NEW VOLUNT	EER	RETURNING VOL	UNTEER		
IF RETURNING, P	LEASE LIST SUMMER(S) YOU	VOLUNTEEREI	D AT WVAC:	1	1	
	r available dates and preferred pased on their preferences. Sumi WEEKLY SUMMER CLASS S	mer ARTventure	s classes are listed	d online at <u>www.waterworks.</u> ROUP PREFERENCES		
	(CIRCLE WEEK/S AVAIL	ABLE)	•	LE ALL THAT APPLY)		
	JUNE 10-14, 2024* (Visiting Artis	t Residency)		ists, Art Educators, or Education College Major, On	ly	
	JUNE 17-21, 2024			AGES 4-5		
	JUNE 24-28, 2024			AGES 6-8		
	JULY 8-12, 2024			AGES 9-12		
	JULY 15-19, 2024			AGES 12-18		
2. What skills or s	t experience (classes taken in special talents do you have tha tarial, computers, etc)	·			with small	
3. What type of vo	olunteer activities would you li	ke to do at Wat	erworks?			
4. Why did you cl	hoose to volunteer at Waterwo	rks?				
PLEASE SIGN TH	E FOLLOWING COMMITMENT	STATEMENT:				
I,contribution, and I v	understand will adhere to all policies and pro	d that my volunte cedures of Wate	eer work at Waterw rworks and my sup	orks Visual Arts Center is ar pervisor.	important	
Signature o	of Volunteer	Date	Signature of Pa	rent/Guardian( <i>if under age18</i> )	Date	

PLEASE RETURN NO LATER THAN MAY 1, 2024