

## Cape Coral Historical Society and Museum Volunteer Application

We are delighted you are interested in helping the museum as a volunteer.  
Please tell us about you and what you'd like to do

### Contact Information

First Name		Last Name	
Mailing Address			
City		State	ZIP
Phone			
Email			

### Membership Information

I am an Individual Member.	
I am a Family Member.	
I am a Corporate Member.	
I am not a member, and would like to become one.	
I am not a member and want to volunteer anyway.	

### I would like to volunteer in the following areas:

Administrative Assistance			Retail (Gift Shop)	
Collections Specialist			Tour Guide	
Docent			Volunteer Coordination	
Garden Steward			Website / Social Media	
Greeter			Youth Programs	
Historical Writer / Editor			Other:	
Maintenance Specialist			_____	
Outreach Coordination			_____	

### Contact Preferences

I prefer that the museum contact me by \_\_\_\_\_ telephone \_\_\_\_\_ e-mail.

#### Print & mail this form to:

Cape Coral Historical Society  
PO Box 150637  
Cape Coral, FL 33915

OR

#### Keyboard entry & e-mail this form:

**Thank you for your support!**