



Historical Society of Ocean Grove

50 Pitman Ave-Ocean Grove , NJ 07756

(732)774-1869[office] (732)774-1865[fax]

Email: info@oceangrovehistory.org

Website: www.oceangrovehistory.org

Volunteer Application Form

(PLEASE PRINT LEGIBLY)

Personal Information

Full Name:

Address:

Home Phone:

Cell Phone:

Email:

Emergency

Emergency

Contact Name:

Contact Phone:

Occupation (Past Occupation if Retired)

Previous Volunteer Experience

Organization: _____ Position Held: _____

Date(s) of Service: _____

Responsibilities: _____

Please Indicate Your Skills & Experience

Tour Guide/Docent

Event Planning

Newsletter

Grant Writing / Research

Writing/Proofreading

Educational Development

Fund Raising

Museum/Archiving

Computer Technology

Marketing

Publicity / Public Programs

Photography



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Volunteer Application Form (cont'd)

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Please Indicate Areas of Interest

- | | | |
|--|--|--|
| <input type="checkbox"/> Centennial Cottage Docent | <input type="checkbox"/> Fund Raising | <input type="checkbox"/> Marketing |
| <input type="checkbox"/> Museum Docent | <input type="checkbox"/> Special Events | <input type="checkbox"/> Publicity / Public Programs |
| <input type="checkbox"/> Hour Tour Docent (Summer) | <input type="checkbox"/> Educational Development | <input type="checkbox"/> Computer Technology |
| <input type="checkbox"/> Tour Guide | <input type="checkbox"/> Event Planning | <input type="checkbox"/> Photography |

Other Information That Will Help Assign You To A Position:

Please Indicate Your Availability:

- | | |
|-------------------------------------|-------------------------------------|
| <input type="checkbox"/> Mon (AM) | <input type="checkbox"/> Mon (PM) |
| <input type="checkbox"/> Tues (AM) | <input type="checkbox"/> Tues (PM) |
| <input type="checkbox"/> Wed (AM) | <input type="checkbox"/> Wed (PM) |
| <input type="checkbox"/> Thurs (AM) | <input type="checkbox"/> Thurs (PM) |
| <input type="checkbox"/> Fri (AM) | <input type="checkbox"/> Fri (PM) |
| <input type="checkbox"/> Sat (AM) | <input type="checkbox"/> Sat (PM) |

Skills & Experience You Would Bring To Your Volunteer Role:

- | | | |
|--|--|---|
| <input type="checkbox"/> Organizational Skills | <input type="checkbox"/> Public Speaking | <input type="checkbox"/> Blogging |
| <input type="checkbox"/> Board Member Experience | <input type="checkbox"/> Teaching Skills | <input type="checkbox"/> Experience With Children |
| <input type="checkbox"/> Web Sites | <input type="checkbox"/> Computer Skills | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Publicity | | |

Do You Have Any Physical Limitations? No Yes (If Yes, Explain Below)
(Please Note: Not All Sites Are Handicap Accessible)

Signature of Applicant: _____ **Date:** _____

Parental Consent (for those under 18 yrs of age)

I give, _____ my consent to work as a
Volunteer at the Historical Society of Ocean Grove.

Parent/Guardian Signature: _____ **Date:** _____