



REAL. TRUE. FUN.

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www.rogersarkansas.com/museum



Volunteer Application

Name: _____ Date: _____

Address: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Circle times most available: Mon. Tues Wed. Thur. Fri. Sat.
AM PM AM PM AM PM AM PM AM PM AM PM

Current/former occupation: _____

Restrictions that might affect the type of work you do: _____

Emergency contact: _____ Phone: _____

References: (Name and Phone number) _____

I am interested in:

_____ Guiding tours of the historic house _____ Collections

_____ Working in the garden

Check other skills and interests:

_____ Retail _____ Painting _____ Research

_____ Sewing _____ Teaching _____ Spanish

_____ Carpentry

