



BOONTON HISTORICAL SOCIETY AND MUSEUM

210 MAIN STREET, BOONTON, NEW JERSEY 07005 ♦ 973/402-8840

VOLUNTEER APPLICATION

Name: _____

Address: _____

Home phone: _____ Cell phone: _____

E-mail: _____

Age if under 18: _____ Are you a member of the Boonton Historical Society? _____

Present employer / school (or both if applicable):

Reference's name: _____ Relationship: _____

Phone: _____

Emergency contact: _____ Relationship: _____

Phone: _____

How did you learn about us?

What are your interests / hobbies / special skills?

What type of volunteer work would you like to do? (i.e. docent, collections/archives, gift shop)

What other volunteer experience do you have?

When can you volunteer? Days: _____ Best hours: _____

Is there anything else you would like to share with us?

(signature)

(date)

Please return this form to the Boonton Historical Society, 210 Main Street, Boonton, NJ 07005
Or email it to boontonhistory@boonton.org. Thank you for your interest!