



### Corps of Volunteers Application

Legal name \_\_\_\_\_  
First Middle Last (Maiden) Preferred Name

Address \_\_\_\_\_  
Street City Zip

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email Address \_\_\_\_\_ Birth date \_\_\_\_\_

Emergency Contact \_\_\_\_\_  
Name Relationship

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

#### References (other than relatives):

\_\_\_\_\_  
Name Phone Relationship

\_\_\_\_\_  
Name Phone Relationship

#### Current work and/or volunteer commitments

---

---

---

---

#### Areas of interests, music skills or knowledge of second language

---

---

---

---

Availability: Please indicate the time and day(s) you are available to volunteer:

Monday _____	Morning _____	Afternoon _____	Evening _____
Tuesday _____	Morning _____	Afternoon _____	Evening _____
Wednesday _____	Morning _____	Afternoon _____	Evening _____
Thursday _____	Morning _____	Afternoon _____	Evening _____
Friday _____	Morning _____	Afternoon _____	Evening _____

Indicate the number of days per month you are interested in volunteering \_\_\_\_\_

Indicate which month(s) you are interested in volunteering \_\_\_\_\_

Are there any physical conditions to be taken into consideration in arranging volunteer assignments for you? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please explain \_\_\_\_\_

Indicate which responsibility you are interested in volunteering for:

**Education**

**Instrument Petting Zoo assistant**

School campuses \_\_\_\_\_

Master Series concert intermissions \_\_\_\_\_

Symphonic Spooktacular concert \_\_\_\_\_

Downtown Rhythms concert \_\_\_\_\_

**Performance**

Concert Usher \_\_\_\_\_

Concessions \_\_\_\_\_

Post-Concert Stage Crew \_\_\_\_\_

**I confirm that all information I have included is correct and I realize that acceptance as a volunteer is based on the combination of my interests and talents and the needs of the Victoria Symphony. I realize that specific opportunities may not be available at a given time, but that my application will be held on file.**

Signature: \_\_\_\_\_

Date \_\_\_\_\_

**Return application to:  
Victoria Symphony – Director of Education  
2112 North Navarro  
Victoria, Texas 77901  
Fax: (361) 575-8216**

For further information or questions, please contact the **Director of Education** at [vseducation@sbcglobal.net](mailto:vseducation@sbcglobal.net).