



CENTER FOR THE ARTS, INC.  
453 Northampton St. Easton, Pa 18042-3562

**Attn: Frank P. Kutch**

Phone: 610 258 7766 x.202

[www.statetheatre.org](http://www.statetheatre.org)

Fax: 610 258 2570

## Volunteer Application

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Email address \_\_\_\_\_

Home Phone(\_\_\_\_) \_\_\_\_\_ Cell Phone(\_\_\_\_) \_\_\_\_\_

Work Phone(\_\_\_\_) \_\_\_\_\_

Emergency Contact:

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

Emergency Phone: Home(\_\_\_\_) \_\_\_\_\_ Cell(\_\_\_\_) \_\_\_\_\_

Work Experience \_\_\_\_\_

Theater Experience (responsibility & organization) \_\_\_\_\_

Hobbies, skills, special training or interests \_\_\_\_\_

What interests you about being a volunteer at The State Theatre? \_\_\_\_\_

How did you hear about the Volunteer Program? \_\_\_\_\_

Time available: Morning \_\_\_\_\_ Afternoon \_\_\_\_\_ Evening \_\_\_\_\_

Weekday \_\_\_\_\_ Weekend \_\_\_\_\_ Open \_\_\_\_\_

Check Days available: Mon Tue Wed Thur Fri Sat Sun

Possible Schedule Conflicts \_\_\_\_\_

Age (If under 18) \_\_\_\_\_

School \_\_\_\_\_

Volunteering for Community Service? \_\_\_\_\_ How many Hours? \_\_\_\_\_

Signature of Parent/Guardian \_\_\_\_\_

Relationship \_\_\_\_\_

Today's Date \_\_\_\_\_

Type name for signature \_\_\_\_\_