



North Carolina Craft Beverage Museum

Volunteer Application

Applicant Information

Full Name: _____ Preferred Name: _____
Surname First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email: _____

Availability

Please indicate when you are available to work. Fridays, Saturdays, and flexible schedules are preferred.

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Mornings	--	--	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Afternoons	--	--	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments: _____

How many hours do you plan to Volunteer?

Hours per Week: _____ Hours per Month: _____ Special Events Only

How long do you plan to volunteer with North Carolina Craft Beverage Museum? _____

Interests

Which of these museum areas interest you? (Check all that apply.)

- Marketing & Outreach Volunteer** Help with our online presence, social media, and press releases.
- Education Program Volunteer** Write and lead programs for all ages on topics from history to science and art.
- Research & Exhibits Volunteer** Prefer to work behind the scenes? This could include research as well as design of exhibits.
- Special Event Support** Help us serve the larger crowds at our special events by directing traffic, selling merchandise, or answering questions in the museum space.

How did you become interested in the NC Craft Beverage Museum? _____

Do you have any employment or volunteer experience related to the volunteer position to which you are applying?

Please list any related hobbies or special interests: _____

Background

Employer / School _____ Title / Position _____

Address _____

Phone _____ May we call, if necessary? YES NO

Highest Level of Education _____ Area of Study _____

How old are you? 15 or under 16-17 18 or older
If under 18, will there be an adult relative or guardian volunteering with you? YES NO

Have you ever been convicted of a crime? YES NO If yes, please explain: _____

References

Full Name: _____ Organization: _____

Relationship: _____ Email: _____ Phone: _____

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Agreement and Signature

I agree to hold as absolutely confidential all privileged and/or sensitive information which I may obtain directly or indirectly, concerning the North Carolina Craft Beverage Museum, its visitors, and its staff and volunteers. I agree that my services will be donated to North Carolina Craft Beverage Museum without compensation or promise of future employment.

I further agree to comply with all of the policies and procedures of the North Carolina Craft Beverage Museum, including safety practices and artifact handling procedures. I understand that my volunteer status may be terminated at any time for 1) failure to comply with the policies and procedures of the North Carolina Craft Beverage Museum and its volunteer program; 2) absence without notification; 3) reasons of unsatisfactory attitude, work, or personal appearance; and/or 4) any other circumstances which, in the judgment of the museum, would make my continued service as a volunteer contrary to their best interests.

I certify that my answers are true and complete to the best of my knowledge. If this application leads to a volunteer position, I understand that false or misleading information in my application may result in my immediate dismissal.

Signature: _____ Date: _____

Please email your completed application to: info@ncbevmuseum.com

The North Carolina Craft Beverage Museum welcomes committed, dependable, and enthusiastic volunteers of any background to join our historic site team. We do not discriminate based on race, religion, gender, sexual orientation, disability, or age.