



VOLUNTEER APPLICATION

First Name

Last Name

Email Address

Phone Number

Have you volunteered for PassinArt before? Yes. No

Why do you want to be part of the PassinArt volunteer eteam?

What organizations have you previously volunteered for?

If so, what was your volunteer role?

What skills and expertise do you bring as a volunteer?

Time Commitment

- Three Months
- Six Months
- Flexible