



VOLUNTEER APPLICATION

National World War I Museum

Attn: Volunteer Coordinator
100 West 26th St.
Kansas City, MO 64108

Phone: 816.784.1917
Fax: 816.784.1929

Name: _____ **Preferred Name:** _____

Birthday: _____ **Preferred method of contact?** ____ Phone ____ E-mail

Phone (Main): _____ **(Alternate):** _____

Address
_____ [Street] _____ [City] _____ [State] _____ [ZIP Code]

E-mail (most frequently checked): _____

Emergency Contact: _____ **Phone Number:** _____

Volunteer/Work Experiences:

Hobbies, Interests, Special Skills:

Do you have any physical concerns or limitations we should know of? If yes, please explain.

Have you ever been convicted of a crime other than minor traffic violations? If yes, please explain.
(Note: a conviction does not necessarily disqualify you.)

References (not related to you):

Name: _____ **Phone:** _____

Name: _____ **Phone:** _____