

# RIVERSIDE THEATRE

## VOLUNTEER FORM

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

Name: \_\_\_\_\_

Address: \_\_\_\_\_

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

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Customer Service Experience: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Do you have any medical conditions that Riverside Theatre should have knowledge of that would prevent you from performing a specific duty as a Riverside Theatre Volunteer:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Years of Volunteer Service at Riverside Theatre: \_\_\_\_\_

Volunteer Interests at Riverside Theatre *(Please check all applicable)*

- Mainstage Usher     Second Stage Usher     Comedy Zone Usher  
 Children's Theatre Usher     Special Events (Mailings, set-up, registration)  
 Administrative (Mailings, answering phones, greeting guests)     Technical

Availability/Preference for volunteering at Riverside Theatre *(Please check all applicable)*

- Days                       Evenings                       Both  
 Monday  Tuesday  Wednesday  Thursday  Friday  Saturday  Sunday