DESERT CABALLEROS WESTERN MUSEUM
Arizona’s Most Western Museum
21 N. Frontier Street • Wickenburg, AZ 85390 • 928-684-2272 • info@westernmuseum.org

VOLUNTEER INFORMATION FORM

Title: _______ (Mr. Mrs. Ms. Dr…)  

First Name: ___________________________ MI: ___ Last Name: ________________________________

Mailing Address: __________________________________________________________

City: ___________________________ State: _____ Zip: __________________________

Home Phone: ___________________________ Cell Phone: __________________________

Email: ________________________________________________________________

Date of Birth: ___________________________

Emergency Contact: Name: _______________________________________________________

Phone: ___________________________ Relationship: ___________________________

Interested In (Check all that apply):

☐ Admissions Desk   ☐ Museum Store   ☐ Gallery Guide   ☐ Artifact Cataloguing

☐ Exhibit Installation   ☐ Docent/Tour Guide   ☐ Carpentry/Building Maintenance   ☐ Learning Center   ☐ Library

☐ Mailings   ☐ Computer Data Entry   ☐ Gardening/Landscaping   ☐ School Groups   ☐ Special Events

☐ Research   ☐ Boyd Ranch Opportunities

Availability

Days Available (Please circle all that apply):
SUN.   MON.   TUES.   WED.   THURS.   FRI.   SAT.

Comments: __________________________________________________________________________

Months Available (Please circle all that apply):
JAN.   FEB.   MAR.   APR.   MAY   JUNE   JULY   AUG.   SEPT.   OCT.   NOV.   DEC.

Comments: __________________________________________________________________________
Why do you wish to volunteer for the Desert Caballeros Western Museum?


Previous and Current Professional Experience (or attach resume):


Previous and Current Volunteer Experience:


As a volunteer of the Desert Caballeros Western Museum, I agree:

To fulfill all required training, to be prompt and reliable in reporting for scheduled work, to fulfill all the expectations of volunteering, and to accept evaluations of my performance from staff. I understand the Museum reserves the right to conduct background checks on all volunteers as a condition of service.

While volunteering for Desert Caballeros Western Museum, no compensation is expected in return for services and the Museum will not provide any benefits traditionally associated with employment including medical or Worker's Compensation insurance; I am responsible for my own insurance coverage in the event of personal injury, illness and damage to or loss of personal property as a result of my volunteer services.

Waiver and Release:

I, the Volunteer, release and forever discharge and hold harmless Desert Caballeros Western Museum and its successors and assigns from any and all liability, claims, and demands of whatever kind of nature, either in law or in equity, which arise or may hereafter arise from the services I provide to Desert Caballeros Western Museum.

Signature: ___________________________ Date: ___________________