



# FUTURE OF FLIGHT AVIATION CENTER VOLUNTEER APPLICATION

DATE:

NAME (LAST, FIRST, INITIAL)							
ADDRESS (STREET, CITY, ZIP CODE)							
PHONE (DAY)		PHONE (EVENING)		E-MAIL ADDRESS		MONTH/DAY OF BIRTH (MM/DD)	
WHY DO YOU THINK YOU WOULD ENJOY VOLUNTEERING AT THE FUTURE OF FLIGHT AVIATION CENTER?							
RELEVANT PAST VOLUNTEER OR WORK EXPERIENCE (attach resume if prefer)							
ARE YOU CURRENTLY EMPLOYED, AND IF SO, WHERE?							
EDUCATION							
SPECIAL SKILLS (COMPUTERS, ART, EDITORIAL, FOREIGN LANGUAGES, ETC.)							
<b>REFERENCES</b>							
NAME			DAY PHONE		EVENING PHONE		
NAME			DAY PHONE		EVENING PHONE		
<b>IN CASE OF EMERGENCY</b>							
NAME			DAY PHONE		EVENING PHONE		
SPECIAL MEDICAL CONDITION THE MUSEUM STAFF SHOULD BE AWARE OF (ALLERGIES, ETC):							
<b>DAYS AND TIME AVAILABLE (check all apply)</b>							
	SUN	MON	TUE	WED	THUR	FRI	SAT
AM							
PM							
<b>APPLICANT SIGNATURE</b>					<b>DATE</b>		

Mail or FAX to:

Visitor Services Manager  
 Future of Flight Aviation Center, 8415 Paine Field Blvd, Mukilteo, WA 98275  
 (425) 265-9808 FAX