



Bucks County Historical Society
84 South Pine Street
Doylestown, PA 18901

VOLUNTEER APPLICATION

Today's Date: _____

Name:

Preferred pronouns: _____

Address:

E-mail: _____

Phone: Cell _____

Home _____

Current Occupation: _____

*** Please attach current resume to this application (highly preferred).**

Recent Work/Volunteer Experience:

Relevant Volunteer Skills:

Minimum Number of Days Available To Work Per Week: _____

Maximum Number of Days Available To Work Per Week: _____

Available/Desired Start Date: _____

Please indicate your availability for shift days and times below::

Monday: A.M.____ P.M.____ Friday: A.M.____ P.M.____

Tuesday: A.M.____ P.M.____ Saturday: A.M.____ P.M.____

Wednesday: A.M.____ P.M.____ Sunday: A.M.____ P.M.____

Thursday: A.M.____ P.M.____

Please List at least two professional references:

1- Name: _____
Business/ Organization: _____
Address: _____

Phone Number: _____
Email: _____
Relationship to you: _____

2- Name: _____
Business/ Organization: _____
Address: _____

Phone Number: _____
Email: _____
Relationship to you: _____

3- Name: _____
Business/ Organization: _____
Address: _____

Phone Number: _____
Email: _____
Relationship to you: _____

Please tell us what type of position you are interested in:

Please share why you are interested in volunteering at the Mercer Museum & Fonthill Castle:

Any additional Information you would like us to know:
