

Volunteer Application Form

Name						
				2	Zip	
Phone		Ema	il			
Emergency C	Contact and Phor	ne:				
I am:						
☐ 16 years of	age or older					
Please	•		•		throughout the duration	
What is your	availability?					
□ Monday	□ Tuesday	\square Wednesday	□ Thursday	□ Friday	□ Saturday	
Please	e note, not every v	□ Afternoons (1PM olunteer opportunity r more information a	has the same availa	ble hours. Plea	ise contact	
I am interes	sted in the follo	owing volunteer o	opportunities (pl	ease mark a	ll that apply):	
\square Farmstead and Gardens		\square M	☐ Museum Store			
☐ Research Library		□ Vi	\square Village Preservation			
\square Community Events		\Box Fa	☐ Facilities			
Upon red	ceipt of this form	n, you will be contac in	eted by the Directo terests.	r of Operatio	ns to discuss your	

Thank you for your support. We could not do it without you!

Please return by mail to 3755 Tonawanda Creek Road, Amherst, NY 14228;

or by email to volunteers@bnhv.org