

# LA QUINTA ARTS FOUNDATION

## Volunteer Services Profile

**Date** \_\_\_\_\_ **Age Range:** 15-18\_\_\_\_ 19-25\_\_\_\_ 26-40\_\_\_\_ 56-70 \_\_\_\_ 71+\_\_\_\_

**Name** \_\_\_\_\_ **Spouse** \_\_\_\_\_  
Last First

**Local Address** \_\_\_\_\_  
Street City State Zip

**Summer Address** \_\_\_\_\_  
Street City State Zip

**Phones** \_\_\_\_\_  
Local Cell Alternate

**E-mail (required)** \_\_\_\_\_

**Emergency Contact** \_\_\_\_\_  
Name Phone

**Areas of Interest (please check all that apply):**

<b>Events:</b>	Festival	Umbrellas	Blues, Brews & BBQ
<b>Programs:</b>	Workshops	Tours	Lectures
<b>Office:</b>	Computer	Mailings	Phones

**Availability (Circle all that apply):**

**Months:** ALL Jan Feb Mar Apr May Jun Jul Aug Sep Oct Nov Dec

**When :** ALL Weekdays Weekends Daytime Evenings

**Any Work or Physical Restrictions?** \_\_\_\_\_

Are you a current member of **LQAF**? Yes \_\_\_ No \_\_\_

Any interest in **Home Hosting** an artist? Yes \_\_\_ No \_\_\_

**Background Information: Skills, hobbies, previous volunteer/work experience)**

---



---



---

<p>Return completed form to: Debby Nelson, LQAF, 78150 Calle Tampico #215, La Quinta, CA 92253          Phone: 760-564-1244 x 106 FAX: 760-564-6884 E-mail: Debby@lqaf.com</p>
--