VOLUNTEER APPLICATION FORM

Thank you for expressing an interest in volunteering at Cairns Art Gallery. Please fill in the following form and email to info@cairnsartgallery.com.au

Name			
Postal	Address		
Phone			
Email:			
Do you	ı have any volunte	er experience? If yes, please provide details.	
What i	s your area of into	rest in regards to volunteering?	
	Assist customers in the Gallery Shop / Front of House Walk the floor / Invigilator Assist with administrative tasks Assist in art classes (Blue card required)		
	rolunteer shifts ru e indicate your ava	n for 2 hours, but all time is appreciated. ilability	
	Tuesday Wednesday Thursday Friday	TIMES	

Volunteers are a valuable part of our Gallery, and we appreciate your time.

A Blue Card is required to assist in Gallery activities that include children, we can assist you with this process.

For more information please contact: info@cairnsartgallery.com.au
Cairns Art Gallery
[07] 4046 4800