

Volunteer Application Form

Thank you for your interest in volunteering at Maldon Museum in the Park. Please tell us about yourself by completing the form below and return to:

- Our front desk during opening hours (Wednesdays, Fridays, Saturdays & Sundays 1- 4pm)
- enquiries@maldonmuseum.org.uk
- Maldon Museum in the Park, 47 Mill Road, Maldon, Essex, CM9 5HX.

Personal D	etails								
First name	e(s):	Surname							
Address a postcode:	nd								
Home		Mobile:							
telephone: Email:								-I	
About you									
Which role	e are you	u interes	sted in?						
☐ Museum steward ☐ \					Volunteer Co-ordinator				
☐ Collection Assistant ☐ G					Gardener				
Please tell are interes				urself iı	ncluding	ı any sk	ills or r	elevant experience and why you	
vailability	ı								
Please tick when you are available to volunteer (when we most need volunteers are during our or which are Wednesdays, Fridays, Saturdays & Su							nours	Additional Comments including any access requirements	
Morning	Mon	Tues	Weds	Thurs	Fri	Sat	Sun	_	
Afternoon								_	
confirm I a	m over 1	8 and le	gally ent	itled to v	/olunteer	in the l	JK	1	
Signature						Date			