Volunteer Application

Please Print



Today's Date:					
Please note, applicants must be	18 years of age or	older. Are you	ı 18+? Ye	es No	
Last:	Fir	st:			
Email:					
Address:					
City:	State:	Zip:			
Home Phone:	Work	Work/Cell:			
In Case of Emergency, please ca	ll:Relationship:				
Phone: _			_		
Do you have access to reliable t					
First name as you would like it t	o appear on namet	ag:			
Please tell us what volunteer op	portunities interes	t you:			
Usher, Ticket Taker, Gre	eter				
Administrative Work					
Gardening/Plaza Maint	enance				
Please select the days of the weel	k and times you are	typically availa	ble:		
Sunday Monday Tues	day Wednesday	Thursday	Friday	Saturday	
Times: Morning Afterno	on Evening				
Please list related experience/sp	ecial skills & talents	:			

Please return this form to:

The Hanover Theatre & Conservatory for the Performing Arts, c/o Volunteer Coordinator 2 Southbridge Street, Worcester, MA 01608

OR

Save this document to a file on your desktop. Attach your file and subject line labeled as "The Hanover Theatre Volunteer Application (insert year)"

Submit your application via email to volunteer@thehanovertheatre.org. Questions? Please email volunteer@thehanovertheatre.org or call 508.471.1758.

Please note that we collect volunteer applications all year long, but we only review them and set-up interviews annually in August prior to the start of a new season. We will contact you at that time.