

**Brevard Veterans Memorial Center (VMC)
Museum and Library Volunteer Program**

First Name _____ MI _____ Last Name _____

Date of Birth _____ Phone _____ E-mail _____

Address _____

Veteran Related to a Veteran Student Other _____

Select all Areas of Interest:

Museum Docent: Greet museum visitors, provide an orientation and answer questions.

Library: Greet library visitors, maintain the library, track check-outs and returns, catalog books, and read and provide critiques of books for both staff and patrons, if desired.

Special Skills: _____

Physical Limitations: _____

Museum Availability: (indicate weekly, bi-monthly or monthly in one or more boxes below)

	Sun	M	T	W	Th	F	S
1000 - 1300							
1300 - 1600	1200-1600						

Library Availability (indicate weekly, bi-monthly or monthly in one or more boxes below)

	Sun	M	T	W	Th	F	S
0900 - 1230							
1230 - 1600							

Comments: _____

Sign: _____ **Date:** _____

Hand carry or mail: VMC, ATTN: Dean Schaaf, 400 S. Sykes Creek Pkwy, Merritt Island, FL 32952
(Questions call: 321-453-1776 ext 5)