

VOLUNTEER FORM



Contact Information

Name: _____ E-mail: _____ Phone# _____

Address: _____ School: _____

Questions

Why do you want to volunteer for ITO? _____

How did you hear about ITO? _____

What are your strong points? _____

Do you have any relevant past experience? _____

What is your availability? _____

What computer programs are you familiar with? _____

What art mediums are you interested in? _____

What art mediums do you have experience in? _____

Would you be interested in taking photographs, working on the website or setting up a facebook group? (Please specify) _____

Volunteer Opportunities

Check boxes of which volunteer opportunities you would like to be involved with:

Art Parties

Open Mic Nights (Thursdays)

Art Camp

Studio Maintenance

Exhibits

Availability

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Time							

For more information, visit us at
1433 Pelham St. or call us at **(905) 892-1709**