

Tales 'N' Trails Museum 1522 E Highway 82 Nocona, TX 76255 (940) 825-5330

Questionaire for Volunteers and Board of Directors Member Applicants

Name:	
Address:	
Phone (Home):	Phone (Cell):
Email Address:	
Name: Address: Phone (Home): Email Address: Hobbies / Interests: Brief Employment History: How long have you lived in Montague County? Have you volunteered or attended any previous TNT Museum activities: If so, what? What qualifications, interests, talents or skils do you think would be beneficial to the museum? What background in history do you have? What educational training? Which Areas of Interest are you interested in assisting with? [] Docent: Guide for tour groups or individual tours, storytelling, etc. [] Office: Filing, answering phones, computer work, updating files, etc [] Archives: Scanning books, indexing archives, cataloging artifacts, transcribing oral histories, etc. [] Exhibits: Setting up or taking down exhibits, pulling items for exhibits, rearranging exhibits, working on signage for exhiits, etc. [] Gift Shop: Maintaining inventory, straightening up, searching internet for items to stock, etc. [] Outdoor / Indoor: Landscaping, maintenance, outdoor exhibit upkeep and repair, painting, dusting, mopping, cleaning bathrooms, cleaning exhibit areas. [] Programs: Create and/or participate in programs for community, schools, groups, classes, etc. [] Research: Research any topics relating to Montague County history in our five focus areas for museum collections to include in binders, books, catalog systems, etc.	
Brief Employment Histor	·y:
How long have you lived	in Montague County?
What qualifications, inte	rests, talents or skils do you think would be beneficial to the
Which Areas of Interest are	you interested in assisting with?
[] Archives: Scanning b	
exhibits, working on sig	nage for exhiits, etc.
	ng inventory, straightening up, searching internet for items to stock,
[] Outdoor / Indoor: Lar dusting, mopping, clean [] Programs: Create and	ing bathrooms, cleaning exhibit areas.
[] Research: Research a for museum collections	
1 1	ing and conducting events such as Shebang, History Mystery, Annual tc.

I agree that the Tales 'N' Trails Museum has the right to conduct any and all backgroun checks about me to determine my eligibility to serve the Museum, and to provide a copy my driver's license or other acceptable form of identification to the Museum.			
I acknowledge that the Museum may forbid any individual from serving of a felony, any violent act, theft, drug use, embezzlement, or hate crime acknowledge that I must sign my receipt of and acceptance with all Mus Maintenance Policy & Procedures, Governance Procedures and Code of Volunteer Handbook Procedures.	. I also eum Operations /		
I have agreed to serve as a volunteer at Tales 'N' Trails Museum. This cowaiver, release, and hold harmless agreement covering events and occur with the volunteer activities. If I have concerns about my health or ability volunteer activities, it is my responsibility to discuss my concerns with response deciding to participate as a volunteer. As a volunteer, I recognize the employee of TNT nor am I covered by workers' compensation or any other through the Museum. I agree to assume the risk that unexpected events result in loss, harm, injury, or illness to me or damage to my property when participating in or observing volunteer activities or while I am traveling Museum.	rences associated ty to participate in ny physician that I am not an er insurance policy may occur and hile I am		
In the event I require emergency medical treatment, I give permission for the Museum call emergency personnel, and I relieve the Museum of all responsibility and consequent that may arise as a result of any treatment by emergency medical personnel. Further, I accept any and all financial responsibility as a result of performed treatment.			
I hereby indemnify and hold harmless the Museum, its Directors, sponsor volunteers, affiliates, officers, agents, successors and assigns, and any of connected to the Museum from any liability.			
Signature of Applicant	Date		
Acknowledged Receipt by Museum Staff Member	Date		

What days of the week / time do you have available to volunteer at the Museum?