



Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Preferred Contact Method (check one):      Phone      Email

Professional experience: \_\_\_\_\_  
\_\_\_\_\_

Prior volunteer experience: \_\_\_\_\_  
\_\_\_\_\_

What skills and experience will you bring to FHFG as a volunteer? \_\_\_\_\_  
\_\_\_\_\_

What interested you in volunteering with FHFG? \_\_\_\_\_  
\_\_\_\_\_

Please list three references who have known you for five years:

1. \_\_\_\_\_ Phone/Email: \_\_\_\_\_
2. \_\_\_\_\_ Phone/Email: \_\_\_\_\_
3. \_\_\_\_\_ Phone/Email: \_\_\_\_\_

**Where would you like to focus your volunteer efforts? (check one or more)**

Historic Research      Docent      Event Support      Clerical      A.T. Smith House  
FHFG Newsletter Support      Board of Directors

Please Return This Form to:

**MAIL - FHFG, P.O.Box 123, Forest Grove, OR 97116**

**EMAIL: [info@fhfg.org](mailto:info@fhfg.org)**