

Sellersville Theater 1894
24 West Temple, Sellersville, PA 18960
phone: 215-257-5808 • fax: 215-257-3166

APPLICATION FOR THEATER VOLUNTEER STAFF

Name: _____	Date: _____
Address: _____	City: _____
State: _____	Zip Code: _____
Phone #: _____	e-mail address _____

Please give Emergency Contact information:

Name: _____ Relationship to you: _____

Phone Number _____

What is your current occupation? _____

Do you have customer service experience? If yes, briefly describe _____

Do you currently volunteer? If so where and what are your responsibilities? _____

Have you volunteered in the past? If so where and what were your responsibilities? _____

Please write a brief paragraph on why you would like to volunteer at Sellersville Theater 1894

What appeals to you most about working in a live music theater?

Name the last 3 concerts you attended and why you chose them?

Which of your personal assets make you uniquely qualified to volunteer at Sellersville Theater?

How do you define "Great Service"?

How has your sense of humor been valuable to you in exchanges with the public?

To help us get to know you better, please rank yourself on a scale of 1-10 in the following areas:

- | | | |
|---------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Friendliness | <input type="checkbox"/> Team Player | <input type="checkbox"/> Customer Service
Finesse |
| <input type="checkbox"/> Adaptability | <input type="checkbox"/> Salesmanship | <input type="checkbox"/> Physical Stamina |