

# VOLUNTEER APPLICATION

## CALOUNDRA

## REGIONAL GALLERY

### PERSONAL DETAILS

#### TITLE

Miss  Mr  Mrs  Ms

#### NAME

#### AGE (OPTIONAL)

16-20  21-40  41-60  61-70  70+

#### POSTAL ADDRESS

#### STREET ADDRESS

#### TELEPHONE

#### MOBILE

#### EMAIL

#### EMAIL UPDATES

I would like to be advised of functions via email  Yes  No

#### NEXT OF KIN

#### RELATIONSHIP

#### MEDICAL CONDITIONS

### EXPERIENCE/QUALIFICATIONS

Outline details of past experiences working in public/commercial art galleries or other types of museums (whether paid or unpaid).

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List any educational qualifications, skills or abilities achieved.

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**EXPERIENCE/QUALIFICATIONS CONT.**

List any of your work or life experiences which you consider useful for the Gallery's day-to-day operation.

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**VOLUNTEER AGREEMENT**

As a volunteer of the Caloundra Regional Gallery I accept responsibility for:

- + Ensuring my work is professional and timely.
- + Reliably arriving and departing from the Gallery at the rostered times, preferably 10 to 15 minutes prior to the opening times.
- + Finding a replacement volunteer if I am unexpectedly going to be unavailable to meet my roster commitments and also informing the Gallery in advance.
- + Presenting a positive profile of the Gallery to all people at all times.
- + Attending no less than one training session per year – this can include Volunteer Morning Teas.
- + Advise in advance if I am unable to continue volunteering for the Gallery.

**GALLERY AGREEMENT**

In exchange I understand the Gallery will:

- + Keep me informed of changes in any Gallery policies (through either Caloundra Regional Gallery meetings or volunteer/friends morning teas).
- + Keep me informed about forthcoming exhibitions (through Caloundra Regional Gallery meetings or volunteer/friends morning teas).
- + Train and supervise me in my work through workshops (subject to grant availability/successful application through volunteer/friends morning teas). These familiarise volunteers with up and coming exhibitions immediately prior to openings through the Volunteer Education Kit and/or didactic panels which deliver Volunteer Education Kits for each new opening.
- + Extend to me an invitation to every exhibition opening.
- + In recognition of hours spent for the Gallery, the Gallery will endeavour to acknowledge such in any information provided to Council for possible inclusion in it's annual reports.

**SIGNATURES**

I understand that consistent failure to meet my commitments as per this Volunteer/Gallery Agreement will result in a review of my role as a volunteer of the Gallery.

**SIGNATURE**  
VOLUNTEER

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**DATE**

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**SIGNATURE**  
STAFF MEMBER

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**DATE**

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**PLEASE RETURN COMPLETED FORM TO: Caloundra Regional Gallery, PO Box 117, Caloundra Qld 4551**