

Northeast Region Volunteer Form

Thank you for your interest in the Florida Public Archaeology Network! Please provide the following information so that we can determine what events and activities will best suit you.

Personal Information								
Name								
Street Address:								
City:	State:					Zip:		
Phone: ()			_ Alt. Phone:	()				
E-mail:	Birthdate:/ T-shirt size (optional):						nal):	
Emergency Contact Inform	mation							
Emergency Contact Name:	gency Contact Name: Relationship:							
Phone: ()	hone: () Alt. Phone: ()							
Availability: Please check all days and ti	mes that yo	u are typica	ally available.					
	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday	
Morning (8am-noon)								
Afternoon (noon-5pm) Evening (5-9pm)								
Education/Occupation:								
Other Relevant Experie	nce:							
Interests: Prehistoric	Histor	ric (Cemetery	_ Maritime	:			



Desired Volunteer Activities	:								
Construction		Lab	Photography						
Field		Lesson Planning	Research						
Graphics		Outreach/Info Table	Workshops						
Other									
Is there any other information that you would like FPAN to know about you?									
Volunteer Requirements: Participation in FPAN events requires dress and behavior appropriate for an outreach activity. This includes refraining from smoking and use of foul language. Volunteers should not wear tattered or revealing clothing.									
I understand and will comply	with FPAN's	volunteer requirements.							
Signed:			Date:						