

CAFESJIAN'S CAROUSEL VOLUNTEER APPLICATION - 2023

Name: _____ Date: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: Cell _____ Age Grp: _____ 16-22 _____ 22-40 _____ 41-59 _____ 60+
Home _____
E-mail _____

Employment: _____ Student _____ Currently Employed _____ Retired
_____ Full-time
_____ Part-time

All volunteer applicants must consent to and pass a background check before being able to volunteer. Details will be emailed.

Your interests in volunteering

Why do you want to volunteer at Cafesjian's Carousel? _____

Experience

Briefly describe your special interests and skills used in your work and volunteer experiences: _____

Check which areas you are interested in working: _____ Tickets _____ Gift shop _____ Ride _____ Maint.

Operating Schedule:

_____ Shift 1: 10:30-1:30 _____ Shift 2: 1:15-4:15 Mon, Thurs, Fri, Sat and Sun 5/1/23-9/4/23
_____ Shift 1: 10:30-1:30 _____ Shift 2: 1:15-4:15 Sat, Sun plus Thurs/Fri of MEA week 9/5/23-10/31/23

(If interested in volunteering for the full day, please check both 1st and 2nd shifts.)

Personal

Physical restrictions or medical conditions that we should be aware of:

_____ no heavy lifting _____ limited bending/reaching _____ limited standing
_____ unable to tolerate circular motion of carousel Other (please explain): _____

Emergency Contact:

Name: _____ Relationship: _____
Address: _____ City: _____ State: _____ Zip: _____
Cell Phone _____ Home: _____ Work: _____

From where/whom did you hear about volunteering at Cafesjian's Carousel?

_____ Facebook _____ While visiting Cafesjian's Carousel _____ Friend or neighbor _____ A current volunteer
_____ Instagram Other: _____

Please return this form to: Cafesjian's Carousel or e-mail to: CarouselAccountant@Yahoo.com Phone: (651) 489-4628
1245 Midway Parkway
St. Paul, MN 55103