



LuCille Tack  
Center  
for the  
ARTS

## Volunteer Application Form

Print, complete and return application to:  
LuCille Tack Center for the Arts  
400 N School Street, Spencer WI 54479  
715.659.4499 • info@lucilletackcenter.com  
www.lucilletackcenter.com

The LTCA is a 501 (c)(3) charitable organization

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

HOME PHONE \_\_\_\_\_ CELL PHONE \_\_\_\_\_

EMAIL \_\_\_\_\_ BIRTHDATE Month/Day \_\_\_\_/\_\_\_\_

EMERGENCY CONTACT \_\_\_\_\_ PHONE \_\_\_\_\_

Were you referred by, or are you friends with, a current or past LTCA Volunteer?

Yes  No If yes, who?

\_\_\_\_\_

Do you have any physical conditions that would limit your ability to perform certain tasks or duties?  Yes  No If yes, please explain.

\_\_\_\_\_

Indicate the days and times you're **typically available**, OR mark FLEXIBLE, if you have no set schedule.  Flexible ☺

- Monday Hours \_\_\_\_\_ - \_\_\_\_\_
- Tuesday Hours \_\_\_\_\_ - \_\_\_\_\_
- Wednesday Hours \_\_\_\_\_ - \_\_\_\_\_
- Thursday Hours \_\_\_\_\_ - \_\_\_\_\_
- Friday Hours \_\_\_\_\_ - \_\_\_\_\_
- Saturday Hours \_\_\_\_\_ - \_\_\_\_\_
- Sunday Hours \_\_\_\_\_ - \_\_\_\_\_

In what area(s) do you believe your CURRENT skills are best suited? Check all that apply.

- Front of House (Ushers)
- Backstage/Technical
- Gallery
- Performer Hospitality
- Ticket Office
- Special Talent

\_\_\_\_\_

Do you have any special skills you feel would be useful to the LTCA? Please describe.

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Are you interested in learning a NEW skill in which you could volunteer your time? If so, please describe.

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How did you hear about LTCA Volunteer opportunities? \_\_\_\_\_

**Most volunteers must be at least 16 years of age at the beginning of service.  
Backstage/technical volunteers must be at least 18 years of age.**

Thank you for your interest in at the LuCille Tack Center for the Arts. Please consult with your physician to ensure you are in good enough physical health to perform various volunteer duties. We will depend on you to speak up if asked to do a task you are not physically able to safely accomplish. It is also important that you learn, and follow, the rules, procedures and instructions of LTCA staff and lead volunteers.

By checking this box, I certify that I will learn and follow the rules, procedures and instructions of LTCA staff and lead volunteers. If I ever find myself in a volunteer situation that I feel could be unsafe or harmful to my wellbeing, I understand it is MY responsibility to immediately decline the task.

Name \_\_\_\_\_

Date \_\_\_\_\_

Your assistance as an LTCA Volunteer greatly benefits our organization, youth, Arts enthusiasts and our greater central Wisconsin community. On behalf of all, we thank you for your willingness to serve in your chosen capacity.