



Thank you for your interest in the Tower.  
Please return your completed application to:  
Tower Theatre Volunteer Coordinator  
PO Box 1378  
Bend, OR 97701

**Volunteer Application**

Date \_\_\_\_\_

Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ E-Mail \_\_\_\_\_

Business/work/education background \_\_\_\_\_

Are you willing to be a volunteer with the Tower Theatre for one year?    Y    N

Please check the volunteer positions that interest you most:

\_\_\_ Ticket Taker/Usher    \_\_\_ Stage Crew    \_\_\_ Office    \_\_\_ Sales    \_\_\_ Special Projects

What are your reasons for wanting to volunteer at the Tower Theatre?  
\_\_\_\_\_

What special skills are you willing to share with the Tower Theatre?  
\_\_\_\_\_

Who referred you to the Tower? \_\_\_\_\_

Please list one local contact: (*in case of emergency*):

1. \_\_\_\_\_ Phone # \_\_\_\_\_

Relationship to you: \_\_\_\_\_

If you are under the age of 18, please include signature of parent or guardian:

\_\_\_\_\_

Thank you for your interest in the Tower.  
Please return your completed application to PO Box 1378, Bend OR 97709  
Or email to [yoleen@towertheatre.org](mailto:yoleen@towertheatre.org)