



Be a Volunteer!

Please circle any area you would be willing to help.

Sewing / Costuming	Sound Design/ Operating
Lighting Design/ Operating	Properties Design/ Management
Directing/ Dramaturge	Theatre Admin. / Office Assistant
Dance / Choreography	Hair & Makeup Design/Application
Ushering	Facilities Operations
Music Direction	Outreach/ Public Relations
Production/ Technical Coordinator	Photography / Video Archiving
Stage Management	Running Crew/ Stage Hand

Other: _____

Name: _____

Your child's name (if applicable): _____

E-Mail: _____

Phone: _____

Thank you for being willing to help.

We are required to perform background checks on all volunteers 18 years of age and older.

Please complete the below information.

Date of Birth: _____ Driver's License # _____

I, _____, give ArtsView Children's Theatre permission to run a background check.

Have you ever been arrested? ____ Yes ____ No

Are you currently under investigation for ANY criminal activity? ____ Yes ____ No

If "Yes" to either of the above questions, please explain on the back. Thank you.

Signature: _____ Date: _____