



Interested in volunteering?

The Powell River Historical Museum & Archives (PRHMA) welcomes your support and dedication.

PRHMA plays a valuable role in preserving the cultural, historical, and documentary heritage of Powell River and the region from Desolation Sound to the Jervis Inlet including Harwood, Hernando, Savary and Texada islands. While the museum preserves objects and artifacts, the archives preserves written, visual, and oral records of the history of Powell River.

As a volunteer at the Powell River Historical Museum & Archives you will:

- Experience wonderful and enriching opportunities
- Be fulfilled with a great sense of achievement and personal growth
- Be involved in a variety of tasks and projects
- Contribute to the enhancement and excellence of two museums
- With 40 hours (30 hours for students) of completed service receive a free 1 year membership to the PRHMA including 10% off in our Gift Shop

The Powell River Historical Museum & Archives Society is a Non-Profit Society. As such, we rely on funding from governments, donors, sponsors and the kindness of our volunteers to help run our museums and events.

By offering to be a volunteer for the PRHMA, you are embarking on a mission to inspire and educate the community about the history of Powell River and the region. We are passionate about our local history, and we hope you will share this passion with us.

There are many exciting and fun opportunities to volunteer at the PRHMA throughout the year. For students, these are a great way to earn your volunteer hours for school.

If you are interested in joining our team of volunteers please fill out a Volunteer Application.

Powell River Historical Museum & Archives

Volunteer Application



Thank you for choosing Powell River Historical Museum & Archives for your Volunteer Experience! Please complete the following form in order to help us assess your volunteer interests. Completion of this form does not indicate your acceptance as a volunteer. Our process includes a review of your application including a Criminal Record Check, an interview and reference check. The Volunteer Review process may take some time to complete and we thank you for your patience.

All personal information is collected strictly for the administration of the Powell River Historical Museum & Archives Volunteer Program and is confidential. Please direct any questions to the Collections Manager at 604.485.2222.

General Information

Last Name: _____ First Name: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Home Phone: _____ Cell Phone: _____

Email Address: _____

Preferred method of contact: _____

Youth (14-17) Date of Birth _____ Adult (18+) Date of Birth _____
DD / MM/ YYYY DD / MM/ YYYY

I am presently:

- Employed Seeking Employment Retired Homemaker
 In School: University College High School

Emergency Contact Name _____ Relationship _____

Emergency Contact Phone _____

Will you require documentation for number of community service hours completed? ___ Yes ___ No

Languages

Spoken

English French Other: _____

Written

English French Other: _____

Availability (check all that apply)

	Mon	Tues	Wed	Thu	Fri	Sat	Sun
Morning							
Afternoon							
All Day							

Approximate Number of Hours

- 4 hours 5-10 hours
 10-15 hours 15-20 hours
 20+ hours

What are your skills? (check all that apply)

- | | | |
|---|---------------------------------------|--|
| <input type="checkbox"/> Art | <input type="checkbox"/> Editing | <input type="checkbox"/> Writing |
| <input type="checkbox"/> Design | <input type="checkbox"/> Marketing | <input type="checkbox"/> Photography |
| <input type="checkbox"/> Genealogy | <input type="checkbox"/> Data Entry | <input type="checkbox"/> Retail |
| <input type="checkbox"/> Research | <input type="checkbox"/> Education | <input type="checkbox"/> Website Design |
| <input type="checkbox"/> Customer Service | <input type="checkbox"/> Organization | <input type="checkbox"/> Computer Literacy |

Areas of interest? (check all that apply)

- | | | |
|--|--|---|
| <input type="checkbox"/> Archives | <input type="checkbox"/> Cataloguing | <input type="checkbox"/> Writing |
| <input type="checkbox"/> Exhibit Planning | <input type="checkbox"/> Construction | <input type="checkbox"/> Visitor Services |
| <input type="checkbox"/> Public Programs | <input type="checkbox"/> Children's Programs | <input type="checkbox"/> Collections |
| <input type="checkbox"/> Conservation | <input type="checkbox"/> Special Events | <input type="checkbox"/> Digitization |
| <input type="checkbox"/> Website/ Online Content | <input type="checkbox"/> Research | <input type="checkbox"/> Tour Guide |
| <input type="checkbox"/> Data Entry | <input type="checkbox"/> Fundraising | <input type="checkbox"/> Other _____ |

Why do you want to volunteer with the Powell River Historical Museum & Archives?

Please list prior experience relevant to your volunteer interests.

Special Project Proposal

If there is a special project or research topic you are interested in please provide a brief description of the project, and why you think it is of value to PRHMA and to the history of Powell River and Area.

References (Please list up to three references we may contact)

Name	Contact Information	Relationship

Agreement and Signature

By submitting this application, I affirm the facts set forth in it are true and complete. I understand and agree that submitting this application form does not automatically register me as a Powell River Historical Museum & Archives volunteer, and that there may be certain qualifications I must meet, including the acceptance of established volunteer policies and procedures before I may begin volunteering. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal from the volunteer program.

Name (Printed) _____ Date _____

Signature _____

Name and Signature of Parent or Guardian if applicant is under the age of 18.

Name (Printed) _____ Signature _____

Thank you for completing this application form. Please return to:

Powell River Historical Museum & Archives, 4790 Marine Avenue. Powell River

Please note that a Criminal Record Check including vulnerable sector screening is required for all volunteers with the Powell River Historical Museum & Archives. You will require a Volunteer Letter in order to apply for a CRC at your local police station. The Powell River Historical Museum & Archives provides you with this letter upon request. Thank you.

Office Use: Date Received _____ Interview Date _____