

Jaime Martín Music Director Designate

volunteer application

contact information

name				
address				
city/state/zip				
tel (eve)		(day)		
birth date				
current employer				
emergency cont	act			
name				
address				
city/state/zip				
tel (eve)		(day)		
email				
Do you have a valid	driver's license? ○ Ye	s O No		
availability	:		:	
weekdays	time of day	weekends	time of day	hours per month
O monday	O morning	○ saturday	O morning	O 1-3 hours
O tuesday	O afternoon	O sunday	O afternoon	4-6 hours7-10 hours
wednesdaythursday	○ evening		evening	7-10 hours10+ hours
friday				O 10+110uis
·			•	
How did you hear about volunteering with LACO?				
○ LACO website	O eLACO	staff member	O family/friend	
In which areas are ye	ou interested in volun	teering?		
○ office	○ concerts	○ music ed	○ fundraising/special events	

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why do you want to volunteer with LACO?

previous volunteer experience?

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special skills or qualifications

summarize special skills and qualifications you have acquired from employment, previous volunteer work or throughother activities, including hobbies or sports.

history with LACO (if any)

music background (not required)

agreement signature

signature
print name
date

our policy

It is the policy of this organization to provide equal opportunity without regard to race, color, religion, national origin, gender, sexual preference, age or disability.

213 626 2157

info@laco.org

email

Thank you for completing this application form and for your interest in volunteering with us.

If you have any questions, please email LACO at info@laco.org or call 213 622 7001.