DOCENT PROGRAM APPLICATION

(Office Use Only: Entered_____)

Thank you for your interest in Gilroy Gardens Docent Program. Our Docents serve as ambassadors to our Gardens by providing courteous, friendly answers to our guests' questions about the Gardens and Park. Training will be provided; therefore, education in horticulture is not required. Please complete the following information for our records.

VOLUNTEER INFORMATION

Name: _____ **Home Phone ( )**_____
Last First M.I.

Address: _____ **Alternate Phone ( )**_____
Number Street

_____ **E-mail**_____
City Zip Code

Date of Birth: _____/ _____
Month Day

How did you find out about the Docent Program?_____

Previous years served as a Docent: 2001 2002 2003 2004 2005 2006 2007 2008 2009 2010
(PLEASE CIRCLE)

SCHEDULE INFORMATION

Gilroy Gardens Family Theme Park requires Docents to commit to a minimum of 8 hours per month during our operating season.

CERTIFICATION OF APPLICANT

The facts set forth in my application for the Docent Program at Gilroy Gardens Family Theme Park are true and complete. I understand the Docent Program at Gilroy Gardens is a non-compensated position and that Docent positions are at-will. I may terminate or be terminated as a Docent at any time.

_____ _____ _____
Printed Name **Signature** **Date**