



Pittock Mansion Volunteer Application

Name: _____ Today's Date: ____/____/____

Date of Birth: ____/____/____ (volunteers must be at least 18 years old)

Street Address: _____

City, State, Zip Code: _____

Phone: (____) _____ E-mail: _____

Emergency Contact Name: _____

Phone: (____) _____ Relationship: _____

Why do you want to volunteer at Pittock Mansion?

Please list any relevant experience or skills (i.e. employment, volunteering, hobbies, etc.):

Thank you for your interest in volunteering at Pittock Mansion. For more information on volunteer roles and training, please fill out and return this application to:

Michelle Fitzsimmons
Pittock Mansion
3229 NW Pittock Drive
Portland, OR 97210
mfitzsimmons@pittockmansion.org
503-823-3587