



The Edna St. Vincent Millay Society at Steepletop  
P.O. Box 2 Austerlitz, NY 12017

Peter Bergman, Executive Director  
director@millaysociety.org

Board of Trustees

**VOLUNTEER INFORMATION FORM**

Frank Crohn,  
President

Elizabeth Barnett,  
Literary Executor

Vincent Barnett

Daniel Beaudry

Tyne Daly

Holly Peppe

Anina Rossen

Matthew Tannenbaum

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

Any disabilities: \_\_\_\_\_

Do you need transportation to work?  Yes  Sometimes

INTERESTS/SKILLS/EXPERIENCE: (check all that apply)

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Library Background | <input type="checkbox"/> Teacher/Lecturer | <input type="checkbox"/> Museum Docent or Guide |
| <input type="checkbox"/> Legal Background   | <input type="checkbox"/> Shop Volunteer   | <input type="checkbox"/> Retail Experience      |
| <input type="checkbox"/> ASL Proficient     | <input type="checkbox"/> Typing/Sorting   | <input type="checkbox"/> Cataloguing Experience |
| <input type="checkbox"/> Literature/Poetry  | <input type="checkbox"/> History          | <input type="checkbox"/> Visual Arts            |
| <input type="checkbox"/> Theater            | <input type="checkbox"/> Music            | <input type="checkbox"/> Local History          |
| <input type="checkbox"/> House Museums      | <input type="checkbox"/> Travel           | <input type="checkbox"/> Other _____            |

Foreign Languages Spoken: \_\_\_\_\_

Other Skills or Interests: \_\_\_\_\_

Word processing programs: \_\_\_\_\_

Availability/Hours Available:  Monday \_\_\_\_\_  Tuesday \_\_\_\_\_

Wednesday \_\_\_\_\_  Thursday \_\_\_\_\_  Friday \_\_\_\_\_

Saturday \_\_\_\_\_  Sunday \_\_\_\_\_

Best time to call \_\_\_\_\_ Dates Unavailable \_\_\_\_\_

Thank you for completing this questionnaire; please mail it to the address above.





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**VOLUNTEER INDEMNIFICATION**

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

As a volunteer for The Edna St. Vincent Millay Society at Steepletop I declare that I have revealed any pre-existing conditions that may affect my work at the site (see below) and that I will inform my supervisors of anything that occurs which may negatively impact on my health or well-being.

I furthermore indemnify and release The Edna St. Vincent Millay Society of any responsibility or claims made through accidents or incidents which impact on my health or well-being during my time as a volunteer on the site. I assume all risks and will make no claims against the Society at Steepletop, now or in the future.

The work I have agreed to perform consists of the following: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Pre-existing conditions which may affect my work or be affected by work:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

So declared:

\_\_\_\_\_

Date: \_\_\_\_\_