# Interactive Neighborhood for Kids Volunteer Information

## **Volunteering**

INK is recruiting volunteers who care about children, our community and our vision to provide educational programs, build children's self-esteem, and provide an environment where families can spend quality time together. Our volunteers assist in establishing an atmosphere where children can develop essential foundational skills and learn respect for others. Volunteers also have FUN pretending to be a kid again-while making a personal difference in a child's life.

Interactive Neighborhood for Kids (INK) is a non-profit institution located in the former Warren Featherbone Center in Gainesville, GA. The mission of Interactive Neighborhood for Kids, Inc., a Children's Museum, is to encourage children of all ages to develop their full potential through exciting hands-on learning. Interactive Neighborhood for Kids strives, through exhibits, to create a unique environment in which children of all ages, abilities, and experience can feel free to imagine, create and explore beyond their dreams.

Interactive Neighborhood for Kids provides a professional work environment that is challenging, rewarding, creative and respectful of ideas and individuals.

# **Requirements:**

Personable, outgoing and caring Energetic and cheerful Age 15 and up Reliable Creative

Ability to interact and communicate with children and adults Excellent customer service skills

Administrative support duties require computer skills, a professional and pleasant telephone manner.

Ability to organize and multi-task.

## **Opportunities:**

#### **Exhibit/Floor Monitor**

Interact with INK's visitors off all ages. Make them feel welcome and encourage them to role-play with each other. Make sure our guests have the best experience possible. Organize and monitor Exhibit area - -ensure they are presentable and secure.

#### **Greeter/Arts and Crafts Room Monitor**

Help with group orientation and assisting other groups during their stay at INK. Help keep the Arts and Crafts room clean and organized, prepare art materials. Make sure our guests understand how to complete the daily craft project.

## Front Desk/Administration/Gift Shop

Greet guests with a smile and enthusiasm. Assist in daily operation of museum and gift shop. Assist staff with check-in and birthday party reservations.

#### **Special Events**

Volunteers needed to plan and implement all phases of special events and fundraising events. Volunteers will assist with day-of activities such as: registration, set-up, sales, clean-up, information table, organizing and running interactive games and just being an ambassador for INK.

## **Evening Rental Monitor**

Volunteers will assist in the evening hours during private party gatherings.

Volunteering is EASY! Call INK at 770-536-1900 or email info@inkfun.org

INK ❖ 999 Chestnut Street ❖ Gainesville ❖ GA ❖ 30501



# **INK Volunteer Application**

Name:				
Last	First		Middle	
Address:				
City:		St:	Zip:	
Home Phone:	Work Phone:			
Other:	E-Mail:			
<b>Personal References</b>				
Name and Relationship:				
Address:				
City:		St:	Zip:	
Phone:	Other:			
Name and Relationship:				
Address:				
City:		St:	Zip:	
Phone:	Other: _			
Please indicate your areas of int	erest below:			
☐ Exhibit/Floor Monitor ☐ Greeter/Arts & Crafts Room M ☐ Front Desk Administration/Gift ☐ Special Events ☐ Evening Rental Monitor				

Please list your special interests, skills or experiences below such as fund-raising, newsletter writing, cooking/nutrition, theatre, etc.		
Check the appropriate box below:		
☐ Employed full time ☐ Employed part time ☐ Not employed ☐ Junior League Volunteer ☐ Other		
If employed: Name of company or organization:		
Supervisor:	Phone:	
Are you currently a student? ☐ Yes ☐ No If yes – please list school:		
Please list other experiences:		
Please list any special medical needs or limitati	ions in order to volunteer:	
Are you currently or have you in the past volur yes, please indicate where, when and contact number:	ame and	
Emergency contact name and number:		
List medical doctor in case of emergency:		
I fully give INK permission to contact my refer check if deemed appropriate. I declare that all application is true and complete to the best of r emergency contact name is not available, I her emergency medical treatment.	of the information I have provided on this my knowledge. In the event that the	
Signature:	Date:	