



# Touch Tank Crew: Teen Volunteer Program

Coastal Children's Museum  
75 Mechanic Street  
Rockland, Maine 04841  
207-596-0300  
[www.coastalchildrensmuseum.org](http://www.coastalchildrensmuseum.org)

# Touch Tank Crew: Teen Volunteer Program

Do you enjoy working with people? Do you love animals and marine life? Are you enthusiastic and knowledgeable?

Our touch tank is a main attraction! Become trained by museum staff to give touch tank demonstrations. Learn to safely hold the critters and teach children about the animal habitats.

Applications are currently being accepted for summer of 2016. Applicants must be at least 14 years old by the the first day of training.



Applications  
Requirements  
Junior Crew  
Volunteers  
Expectations

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## Additional Information

### APPLICATIONS

The Coastal Children's Museum accepts applications on a continuous basis to participate in our summer Touch Tank program. Applicants must be at least 14 years old by the first day of training. By applying to this program, teens and their parents acknowledge that the volunteer meets all of the requirements.



### TEEN VOLUNTEER REQUIREMENTS

- Commit to volunteering a minimum of 2 hours per week throughout the summer or a total of 20 hours between the months of June and August
- Perform position duties as assigned
- Communicate with guests, other teen and adult volunteers, and museum staff
- Work independently and alongside other teen and adult volunteers
- Teen volunteers in this program have the option in the fall to volunteer year-round. Interested teens must commit to at least one shift per month throughout the academic year



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## Additional Information



### JUNIOR CREW

#### Year One Touch Tank Crew

##### Touch Tank:

The touch tank is a main attraction at the Coastal Children's Museum! Work at the touch tank handling marine critters, interacting with children, and demonstrating and teaching about the ocean and its natural habitat.

##### Special Interest Project:

Round out your summer touch tank experience by creating a special interest project.

Select a topic on marine life of interest to you. Research and study your topic. Then create a mini exhibit centered on your area of interest. Exhibits will be made available to, and enjoyed by, museum guests.

### VOLUNTEENS

#### Year Two and Beyond Touch Tank Crew

After a summer on the Junior Crew, teens are invited to return to the museum to work at the touch tank.

The second year and beyond is a time when teens can tailor their experience by creating workshops or programs centered on their specific areas of interest in marine life. Teens work with museum staff to plan, research and develop special programming that will capture the enthusiasm of young children.

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### EXPECTATIONS

- Confirm and secure all necessary means of transportation
- Commit to areas assigned and report to shifts on time
- Attend training sessions
- Notify volunteer coordinator of absences as soon as possible
- Abide by all rules set forth in volunteer handbook
- Abide by safety and behavior policies in the museum at all times
- HAVE FUN!



### For More Information Or To Sign Up:

Please contact the Volunteer Coordinator, Jessica McMahon at **207-596-0300** or email [volunteers@coastalchildrensmuseum.org](mailto:volunteers@coastalchildrensmuseum.org)



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## Additional Information



### Reap the rewards from participating in the Teen Volunteer program!

By joining the Touch Tank Crew you'll receive the satisfaction of meeting and helping new people. In addition, join our Touch Tank Crew and:

- Have fun learning about marine life and sharing your enthusiasm with young children
- Build your resume
- Earn credits for course requirements
- Receive hours for service requirements

Gain an experience that will last a lifetime. Jump in and get involved at The Coastal Children's Museum this summer!





## The Coastal Children's Museum Junior Volunteer Application

Thank you for your interest in volunteering at the Coastal Children's Museum! Volunteers play a vital role in the success and growth of our museum. We rely on dedicated and dynamic volunteers just like you every day. Please be sure you have completed the application fully before submission, and again thank you for your interest!

**We can't wait to meet you!**

### General information:

Name: \_\_\_\_\_  
*Last First Middle*

Address: \_\_\_\_\_  
*Street City State Zip*

Phone(specify home/cell) \_\_\_\_\_ Email: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Preferred contact method: \_\_\_\_\_ Phone \_\_\_\_\_ Email

Current School: \_\_\_\_\_

### Emergency Contact:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

### References:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_

Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_

Relationship: \_\_\_\_\_

### Availability:

\_\_\_\_: \_\_\_\_ to \_\_\_\_: \_\_\_\_ Tuesday (July and August)

\_\_\_\_: \_\_\_\_ to \_\_\_\_: \_\_\_\_ Friday

\_\_\_\_: \_\_\_\_ to \_\_\_\_: \_\_\_\_ Wednesday

\_\_\_\_: \_\_\_\_ to \_\_\_\_: \_\_\_\_ Saturday

\_\_\_\_: \_\_\_\_ to \_\_\_\_: \_\_\_\_ Thursday

\_\_\_\_: \_\_\_\_ to \_\_\_\_: \_\_\_\_ Sunday

**Background:**

How did you hear about volunteering at the Coastal Children's Museum? \_\_\_\_\_  
\_\_\_\_\_

What experience do you have working with children? \_\_\_\_\_  
\_\_\_\_\_

What interested you in volunteering at the Coastal Children's Museum? \_\_\_\_\_  
\_\_\_\_\_

Are you volunteering to fulfill a requirement? Y/N

If yes please give the name, phone number and e-mail of the service coordinator at your school: \_\_\_\_\_  
\_\_\_\_\_

I certify that the information I have provided is true and correct to the best of my knowledge. I understand that any false or misleading statements on my application may result in refusal of my volunteer service, regardless of when discovered. I authorize the Coastal Children's Museum to verify any statements made in this application and to contact my references. I acknowledge that I offer my services as a volunteer and have no expectation of payment, monetary or otherwise for those services.

I agree to follow the rules of conduct and abide by the policies of the Coastal Children's Museum. I understand that if I do not abide by the policies rules and regulations, I may be dismissed from my position as a volunteer.

\_\_\_\_\_                      \_\_\_\_\_                      \_\_\_\_\_  
*name (printed)*                      *signature*                      *date*

Drivers License Number (if applicable): \_\_\_\_\_

**Parental Consent:**

*To be read and signed by a parent or guardian*

I have read the information of the volunteer program at the Coastal Children's Museum. I approve of my child working the hours she/he chooses.

\_\_\_\_\_                      \_\_\_\_\_  
*signature*                      *date*

Please send your completed application to the information below, thank you for volunteering!

Coastal Children's Museum  
75 Mechanic Street Rockland, Maine 04841  
volunteers@coastalchildrensmuseum.org 207-596-0300