



Volunteer Registration Form

Date _____

Name _____

Street Address _____

City _____ State _____ Zip _____

Primary Phone Number _____

E-mail _____

Preferred Method of Contact Text _____ E-mail _____ Telephone _____

What kind of volunteer opportunities are you interested in? (Check one or more)

- Pledge Drive Phone Bank
- Mailings
- Data Entry
- Reception
- Special Events
- Children's Center Facilitator
- Video/Audio Production Support

What days are you available?

Sun _____ Mon _____ Tues _____ Wed _____ Thurs _____ Fri _____ Sat _____

What times are you available?

Morning _____ Afternoon _____ Evening _____

Thank you for your interest in volunteering for PBS Kansas! Please e-mail this form to ltaylor@kpts.org or mail to:

PBS Kansas Channel 8
Attention: Laura Taylor
P.O. Box 783100
Wichita, KS 67278