



Volunteer Sign-Up Form for After-School STEM Adventures

Contact Information:

- Full Name: _____
- Email Address: _____
- Phone Number: _____
- Preferred Contact Method: ☐ Email ☐ Phone

Availability:

- Days Available to Volunteer (Check all that apply):
 - ☐ Monday
 - ☐ Tuesday
 - ☐ Wednesday
 - ☐ Thursday
 - ☐ Friday
- Preferred Time Slots: _____

Areas of Interest (Check any that apply):

- Assisting with STEM activities and projects
- Helping with student supervision and safety

- Setting up and cleaning up the activity space
- Leading a special workshop or demonstration (please describe): _____

Any Relevant Experience or Skills:

Additional Notes or Questions:

Thank you for your interest in volunteering! We'll reach out to you soon with more details.

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