



We Are Columbia

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CREATIVE JOURNEY VOLUNTEER APPLICATION

Date: _____

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone (Home) _____ (Cell) _____

E-Mail: _____

Please describe your area of expertise that you can bring to the program:

What motivated you to want to participate in this program? _____

You will be contacted in the next two weeks to discuss your participation in this program by either Suzy Shealy or Brenda Oliver. Information on the art teams will be reviewed at that point.

Thank you for your interest in this program. Brenda Oliver and Suzy Shealy