



# Palomar Observatory Docent Application

## Contact Information

First name: \_\_\_\_\_ Last name: \_\_\_\_\_  
 E-mail: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Street: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_  
 Zip: \_\_\_\_\_ Today's date: \_\_\_\_\_

Preferred method of contact:  E-mail  Phone  U.S. Mail

## Participation

Select or rank the activities in which you wish to participate:

Classic guided tours  Family tours  Engineering tours  
 Special evening events  School programs  As assigned  
 Other: \_\_\_\_\_

## Motivation

Please tell us more about about your motivations to join the Palomar Observatory Docent program:

1) Why do you wish to volunteer for the Observatory?

2) What special talent or skills would you bring as a volunteer?

3) How often would you be able to volunteer and which days of the week would you prefer?