

(707) 861-9873 kows@sonic.net

PO Box 1073 Occidental CA 95465

Studio: 445 Orchard St Ste 101 Santa Rosa, CA 95404

Volunteer Application

This form is for new people who want to volunteer at KOWS or current members who want to change their show format or commitment. This form must be completed and kept current for all persons who volunteer at KOWS. Forms may be submitted to KOWS at the address above.

Name	Date	,	Email 1
Address	Phone		Email 2
City	State	Zip	Cell
Volunteer Position Interest Music programming Events PSA Production Marketing Other	☐ Fundraising ☐ Construction	☐ Re	ublic Affairs
What are your preferred days/hours? \(\subseteq \text{N} \) How long of a show/project are you interested. How would your show benefit the KOWS con	ed in ?		-
ease describe your ideas for a radio program a	s fully as possible:		
ho are your listeners? What are their interests?	·		
you own or have access to the music and mate	erial necessary for you	ır show/project	t? Yes No
ow long have you lived in the West County area	1?	How long have	e you listened to KOWS ?
ow many hours per week to you listen to KOWS	?	Which program	ns are your favorites ?
edia experience (Print, Radio, TV , Web)			
anguages spoken			

Please provide a bio of yourself on an attached sheet for the KOWS web site. Include a link to a photo of yourself that you would like used on the website.

FREE SPEECH. NO BULL.