Volunteer Application Form
Applications will be active for the period of July-June.

Name: ___________________________________________ Date: ________________

Address: ________________________________________________________________________

Home Phone: _____________________________  Cell Phone: ____________________________

If the volunteer hours are required by a school or other program, please indicate: ________________
_________________________________________________________________________________

For Children, grades 1 - 5 and Teens, grades 6 - 12:   Grade: ______________     Age: ____________

If the applicant is under the age of 18, the applicant’s Parent/Guardian must complete this section.

Parent/Guardian Name: _______________________________________________________________

Address: ___________________________________________________________________________
__________________________________________________________________________________

Telephone: __________________________________ Cell Phone: ____________________________

Emergency Contact Name: ____________________________________________________________

Relationship: ______________Telephone: _________________Cell Phone: _____________________

Volunteer Availability: Please fill in the hours you are available to volunteer.

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<th>Day</th>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
<th>Thursday</th>
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<th>Saturday</th>
<th>Sunday</th>
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This section to be completed by Parent/Guardian after the Library notifies the under 18 applicant of an upcoming volunteer opportunity.

Release for Volunteers Under the Age of 18

I have read the Volunteer Policy and the Guidelines and understand the rules that volunteers must
follow. I hereby give __________________________ permission to perform the volunteer
opportunity listed below.

Volunteer’s First and Last Name

Signature of Parent/Guardian: __________________________Date: ________________

Volunteer Opportunity

<table>
<thead>
<tr>
<th>Activity</th>
<th>Date</th>
<th>Time</th>
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Director’s/Desinee’s Approval:

Signature ___________________________________ Department __________ Date __________

October 2022