



Date / /

Volunteer Application Form

PERSONAL INFORMATION

Full Name:

Date of Birth: / / (Used to determine if the youth department should be notified)

Email: Phone:

Address:

AVAILABILITY

Preferred Days: Monday Tuesday Wednesday Thursday Friday
 Saturday

Preferred Time: Morning Afternoon Evening

Available From:

AREA OF INTEREST

Which area(s) would you like to volunteer in?

Book Sale Light Cleaning Seed Library Gardening/Indoor plants
 Toy Sanitizing Big Events Farmstand/Pantry Help Other

SKILLS & EXPERIENCE

Briefly describe any relevant skills or experience you have:

Do you have any physical limitations that would need to be accommodated for? If yes, please describe:



Are you interested in long-term or short time
volunteer work?

Long-Term Short-Term

Do you need to complete community service
hours?

Yes No How Many?

Do you have a certain amount of hours you need
to complete for school or an organization?

Yes No How Many?

EMERGENCY CONTACT

Name:

Relationship:

Phone:

Terms of Agreement

Staff will try to accommodate individual interests and talents when assigning tasks, but it is not guaranteed. Volunteers will be expected to complete all assigned projects to the best of their abilities.

If your volunteer task(s) require a defined schedule, it is expected that you will adhere to this schedule. If you are unable to come in when you are scheduled, please let the staff person in charge of your task know as soon as possible. If you do not call and do not show up for your scheduled shift, you may be dropped from the volunteer program.

As a volunteer, you agree to abide by all rules and regulations set forth by the Geneva Public Library. By signing this form, the Volunteer releases and forever discharges and holds harmless the Geneva Public Library and its successors and assigns from any and all liability, claims, and demands of whatever kind or nature, either in law or in equity, which arise or may hereafter arise from your volunteer work with the Geneva Public Library.

Volunteers agree to release the Geneva Public Library from any and all liability for personal injuries and property losses or damage occasioned by, or in connection with, the Geneva Public Library, and expressly waive any such claim for compensation or liability on the part of the Geneva Public Library beyond what may be offered freely by the representative of the Library in the event of such injury or medical expense.

I understand and agree to the above terms for being a volunteer at Geneva Public Library.

Signature:

Date:

Parent

Signature:

Date:

(if under 18)