

CARTHAGE FREE LIBRARY  
VOLUNTEER REGISTRATION

The trustees and staff of Carthage Free Library appreciate your interest and your time. We want to make your service here a rewarding and fulfilling experience, and to provide a safe and comfortable environment. Please read the following and complete the form for a better understanding of what you can expect as a volunteer. Thank you!

Name \_\_\_\_\_ Age \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Home Phone \_\_\_\_\_ E-mail \_\_\_\_\_

Emergency Contact \_\_\_\_\_

Phone \_\_\_\_\_ Relationship \_\_\_\_\_

Are you seeking hours for required community service for school or other organizations?

Yes \_\_\_\_\_ No \_\_\_\_\_ Name of the organization? \_\_\_\_\_

Please list any skills and special knowledge you have which might be beneficial to the library such as clerical, computer, working with children, gardening, handyman, etc.  
\_\_\_\_\_  
\_\_\_\_\_

Would you prefer to have a regular schedule or work on special projects?  
\_\_\_\_\_

How many hours per week or month would you like to volunteer?  
\_\_\_\_\_

Which days and times are you available to volunteer?  
\_\_\_\_\_

Reference name, phone and relationship  
\_\_\_\_\_

1. To better serve the public and to maintain an adequate schedule for supervision and liability purposes, volunteers should be scheduled to work by the Library Director or Library Assistants. Service is a minimum of 2 hours.
2. Volunteers must sign in and out. Your service is a "gift of time and talent" and we want to keep an accurate record of times served. This will allow us to recognize those who may deserve special recognition for the time they have donated to us.
3. The Carthage Free Library has the right to evaluate all applicants and will not accept a volunteer that would jeopardize the materials and services of the library or the safety of the library staff and patrons.
4. I understand that I may come into contact with confidential information. I agree to protect this information and not divulge any information during or after my services as a volunteer.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_