

Book Buddies Teen Volunteer Application (ages 12-17)

Name \_\_\_\_\_

Date \_\_\_\_\_

Address (Street, City, State, Zip) \_\_\_\_\_

\_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_

E-mail address \_\_\_\_\_

Grade \_\_\_\_\_ School \_\_\_\_\_

**Expectations for Teen Volunteers**

- You will sign in upon your arrival at the library, and you will sign out when leaving.
- You will dress in a professional manner.
- You will behave courteously to library staff and patrons, and will refrain from talking or texting on your cell phone or socializing with your friends while volunteering.

I have read the expectations of teen volunteers, and understand that, as a volunteer, my behavior reflects upon the library.

Your signature here: \_\_\_\_\_

Name of Volunteer \_\_\_\_\_

(please print)

**Emergency Contact Information**

\_\_\_\_\_  
1. Name of person to contact in case of emergency Relationship to volunteer

\_\_\_\_\_  
Emergency Contact Phone Numbers (day, evening, cell)

\_\_\_\_\_  
2. Name of person to contact in case of emergency Relationship to volunteer

\_\_\_\_\_  
Emergency Contact Phone Numbers (day, evening, cell)

***Parent/Guardian Permission***

Volunteers under the age of 18 must have the written consent of a parent or legal guardian in order to volunteer for the Farmington Libraries.

\_\_\_\_\_  
Signature of Parent or Legal Guardian

\_\_\_\_\_  
Print Name of Parent/Legal Guardian Here