

# Reedsburg Public Library Volunteer Application Form

NAME: \_\_\_\_\_  
Last Name First Name Initial

GENDER: male female Birthdate: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

ADDRESS: \_\_\_\_\_  
\_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

Why would you like to volunteer at the library? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How many hours do you wish to volunteer? \_\_\_\_\_ Weekly \_\_\_\_\_ Total  
 School-related community service  Court Ordered Community Service

Do you have any special talents or interests? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## REFERENCES

Name	Relationship	Phone Number
_____	_____	_____
_____	_____	_____

## EMERGENCY CONTACT

Name	Relationship	Phone Number
_____	_____	_____

I understand that as a volunteer at the Reedsburg Library I will receive no compensation or benefits. I agree to let the Library staff know as soon as possible if I will be late or unable to come for a time I am scheduled to volunteer. I agree to work responsibly and conscientiously at my assigned activities.

VOLUNTEER SIGNATURE \_\_\_\_\_ Date: \_\_\_\_\_

GUARDIAN SIGNATURE \_\_\_\_\_ Date: \_\_\_\_\_  
Required for all minors

Thank you for your interest in volunteering at the Reedsburg Public Library.  
Contact the library at 768-READ (7323) with any questions