

Carbon County Library System

Student/Minor (*Ages 14 - 17*)

Volunteer Program Application

Date _____

For Data Purposes:

Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Birthdate _____ Age _____ Sex _____

Email _____

Any current medical conditions? _____

Emergency Contact _____

Relationship _____ Phone _____

Parent/Guardian Name(s) _____

Address _____

City _____ State _____ Zip _____

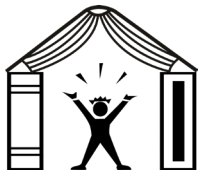
Phone _____ Alt. Phone _____

Employer _____

Email _____

Library location you wish to volunteer at:

How did you hear about us? _____



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Have you ever been convicted of any offense against the law or are you now under any current charge for any offense against the law? _____

If you answered yes, please give the date and details of the offense:

NOTE: Falsification of your answers may result in dismissal of being a volunteer for CCLS

I, _____, being the parent or legal guardian of _____ (the "Minor") hereby consent to and authorize the Minor to act as a volunteer for the Carbon County Library System ("CCLS").

I acknowledge and agree that activities performed by the Minor as a volunteer will be performed strictly on a volunteer basis, without any pay, compensation, or benefits. I agree and understand that the Minor must comply with the rules and regulations established from by CCLS and that failure to do so may result in the Minor's immediate removal as a volunteer.

I am aware of the nature of the activities to be performed by the Minor as a volunteer. I agree that all volunteer activities are to be performed by the Minor, at the Minor's risk, and I assume full responsibility therefore.

On behalf of myself and the Minor I agree not to hold or attempt to hold CCLS or their employees responsible for any injury or damage sustained or incurred by the Minor, arising out of or in any way connected with the Minor's activities as a volunteer at CCLS. I hereby release and discharge CCLS and their employees from any and all claims, demands, causes of action of any nature or cause, for any such injury or damage incurred or suffered by the Minor.

Printed Name of Parent/Legal Guardian

Signature of Parent/Legal Guardian

Date

Printed Name of Volunteer

Signature of Volunteer

Date

Supervisor _____