



Teen Volunteer Application (Grades 7-12) - La Grange Park Public Library

Today's Date _____

Name _____

Address _____

Home phone _____ Cell phone _____

Email _____

School _____ Grade (For the 2022-23 school year) _____

The YA Department will be needing volunteers for future projects. Volunteers will be contacted via email as these projects arise.

Please check *all* the times you would be able to volunteer. Please note: Fridays and Saturdays we close at 5:00pm and Sundays we are only open from 1:00pm-5:00pm.

	Sun	Mon	Tues	Wed	Thurs	Fri	Sat
Morning (10am-12pm)	XXX						
Early afternoon (12-2pm)							
Late afternoon (2-4pm)							
Early evening (4-6pm)	XXX					XXX	XXX
Evening (6-8pm)	XXX					XXX	XXX

I acknowledge I am performing services for the Library voluntarily and freely and do not expect to be paid in any way for performing the services. I do not have an existing employment relationship with the Library related to the services I am providing. I understand I can stop volunteering for the Library at any time, and the Library can ask me to stop volunteering at any time. I am not eligible for any Library benefits, including but not limited to disability or workers' compensation insurance, health insurance, or unemployment insurance.

_____ (volunteer's signature)

Emergency Information

Person to contact in an emergency _____

Relationship to you _____ Phone Number _____

Parent/Guardian

Signature _____ Date _____