

Teen Volunteers

Name: _____

Preferred Contact Method (circle one): Phone Email

Phone: _____

Email: _____

School Year Availability: _____

Summer Availability: _____

What type of volunteer work would you like to help out with? _____

Are you looking to volunteer for a special program? Circle all that apply.

Buddy reading Tutoring Pioneer Days Book Sale

Parent/Guardian Name: _____

Phone Number (in case of emergency): _____

Parent/Guardian Signature: _____

Librarian notes: