

Volunteer Application

Thank you for your interest in volunteering at the library. Please note the following guidelines:

1. Please sign in and out on the volunteer log sheet. As much as possible, please try to schedule your volunteer hours on the calendar so we can plan. Please call in and give as much notice as possible when you are unable to come.
2. As a volunteer, you may be exposed to information of a confidential nature. Such information may not be shared with anyone else including family, friends or acquaintances.
3. Volunteers are asked to remember that they represent the library's image to the public. Therefore, general appearance should be neat and clean. Please refrain from wearing tank tops, swimsuits, or bare bellies.
4. Please avoid personal telephone calls or texting in patron areas while volunteering. If you need to take a call, please take it to staff areas (for a brief call) or outside

Personal Information

Name _____

Present Address _____
STREET CITY STATE ZIP

Phone No. _____ Are you 18 or older? _____

Are you currently employed? _____ If so, who is your present employer? _____

Emergency

In case of Emergency Notify _____
NAME ADDRESS PHONE NUMBER

Volunteering

If you are seeking volunteer hours to fulfill volunteer hour obligations **other than court-ordered community service** (such as confirmation, National Honor Society, government housing, etc.), what is the organization:

_____ Hours needed: _____

When are you available to volunteer?

_____ Monday _____ Thursday _____ Mornings

_____ Tuesday _____ Friday _____ Afternoons

_____ Wednesday _____ Saturday _____ Evenings

In what area(s) would you be interested in volunteering? Please see the Volunteer Opportunities page.



600 Carnegie Blvd
Brownwood, TX 76801
325-646-0155

As a volunteer for the Brownwood Public Library, I do hereby, for myself, heirs, executors and administrators, release and discharge the Brownwood Public Library and all its officers, agents and employees, acting officially or otherwise, from any and all claims, demands, actions, or causes of actions, on account of my death or on account of any injury to myself which may occur from any cause, including, without limitation, any negligent act of the Library, the Library's officers, agents and employees, whether such negligent act was the sole proximate cause of the injury or damage or a proximate cause jointly and concurrently with myself, arising out of my participation in the Brownwood Public Library's community service work activities. I further understand and acknowledge that the Library's decision to allow any participation as a community service worker for the Brownwood Public Library is made in reliance on this release and waiver agreement.

I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if accepted for community service, falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein to give any and all information concerning any pertinent information they may have personal or otherwise, and release all parties from all liability for any damage that may result from furnishing same to the Brownwood Library.

I understand and agree that, if accepted for community service, my service is at will and may be terminated at any time by myself or by the Brownwood Library without any prior notice. I further understand that Brownwood Library makes no promises about number of hours available to work.

I understand that volunteers are not eligible for any compensation, insurance, worker's compensation benefit or any other benefit provided to a Brownwood Library employee, volunteer or patron. I understand that if I am injured at the library I must report the injury immediately to the library staff.

I understand and accept the terms and conditions for volunteering and scheduling as described.

Applicant signature: _____ Date: _____

Applicant date of birth: _____

Applicant last four of SSN: _____

Parent or Legal Guardian Signature if under 18: _____ Date: _____