

# VOLUNTEER APPLICATION FORM

## MERCED COUNTY LIBRARY

### PERSONAL INFORMATION:

Name: \_\_\_\_\_  
Last First Middle

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_ Zip Code: \_\_\_\_\_

Street Address if different from above:

\_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Cell: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Age (circle one):      13-15 yrs old      16-17 yrs old      18 or older

### EMERGENCY CONTACT INFORMATION:

Emergency Contact Person: \_\_\_\_\_

Relationship to self: \_\_\_\_\_

Address: \_\_\_\_\_

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

Emergency Contact Phone Number: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

*Submit a completed copy of this form at your local branch library. If your interest form matches the volunteer opportunity available, you may be contacted to complete the application process. Thank you for your interest in the Merced County Library.*

## AVAILABILITY AND AREAS OF INTEREST

Volunteer goals. Example: work experience, class credit, church, etc.

\_\_\_\_\_

List the library locations where you are willing to volunteer \_\_\_\_\_

List the days you can volunteer: \_\_\_\_\_

Hours available per week \_\_\_\_\_ Times:  Mornings  Afternoons  Evenings

Check how frequently can you volunteer:

Daily  Once a week  Once a month  Twice a month  As needed

How many hours per day can you volunteer: \_\_\_\_\_

Check the opportunities in which you are interested:

Book shelving  Book cleaning & repair  Craft projects

Monthly assistance  Computer assistance

Virtual reality  Program or event assistance

Other specify: \_\_\_\_\_

TO BE COMPLETED BY LIBRARY STAFF	
<b>Departmental Information</b>	
Department Volunteering For: _____	
Department Volunteer Coordinator: _____	
Brief Description of Volunteer Work: _____ _____	
Start Date: _____	Approx. End Date: _____

**VOLUNTEER RELEASE STATEMENT FORM**

**MERCED COUNTY LIBRARY**

I, \_\_\_\_\_, hereby offer my services as a volunteer to provide services to the Merced County Library.

I recognize that I am not an employee of Merced County and that there is no contractual arrangement whatsoever between Merced County and myself.

I hereby agree to assume any and all risks entailed in my volunteer activities for the above-stated purpose and specifically release Merced County from any liability, including but not limited to injuries caused by lifting, bending, stooping, carry materials, falling books and other objects, trip and fall, injuries suffered in driving to and from work sites, etc.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
PRINT NAME

