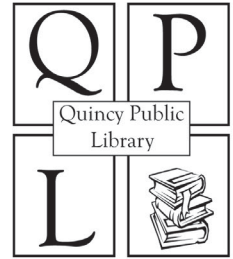


Quincy Public Library

Application for Volunteer Service



Please return this application to:

Volunteer Coordinator
Quincy Public Library
526 Jersey Street, Quincy, IL 62301

217-223-1309, x217

Date: _____

Name _____ Phone _____ Cell _____

Address _____ Email _____

City _____ State _____ Zip _____

Availability (Please fill in times next to the appropriate day(s).)

Monday _____ Tuesday _____ Wednesday _____

Thursday _____ Friday _____ Saturday _____

Community Service

Will this volunteer service fulfill a community service requirement? YES NO

If yes, please explain:

Relevant interests, skills, education, or experience (Please continue on back of page, if needed.):

Media Release

I hereby consent to the reproduction, publication and use of photographs, slides, and/or video taken of me by the Quincy Public Library staff for educational, and/or publicity purposes for any and all publications, advertising or publicity media, without limitation or reservation and without claims for compensation or for damages arising out of the use of said materials.

Liability Release/Permission for Emergency Medical Treatment

I release the Quincy Public Library from liability from any accidental injury which may occur while I perform any volunteer activities for the Quincy Public Library. I agree to allow Quincy Public Library staff to seek treatment in my best interest during an emergency, and I agree to incur all costs associated with treatment.

Certification

I certify that the answers contained in this application are true and complete to the best of my knowledge. My volunteer service is conditional upon completion of this application, participation in an interview process, and consent to a background check. If any offer of volunteer service is accepted, I will not be entitled to compensation for any services I provide.

Signature _____ Date _____

Parental Permission

If you are under 16, please have a parent/legal guardian sign this form:

I (print), _____ parent/legal guardian, grant permission

for (print) _____ to volunteer at Quincy Public Library.

Parent Guardian Signature _____ Date _____