



YOUTH VOLUNTEER REGISTRATION FORM

Students who have completed seventh grade are invited to become volunteers at the Albany Public Library. To become a volunteer, please fill out this form and turn it in at either Albany Public Library:



Main Library
2450 14th Avenue SE
Albany, OR 97322

Carnegie Library
302 Ferry Street SW
Albany, OR 97321

Name _____
Last First Middle

Address _____
please include zip code

Telephone _____

E-mail Address _____

Date of birth _____ School _____ Grade _____
during summer, list grade entering in fall

Note: You must have finished seventh grade in order to be a volunteer at the Albany Public Library.

Parent or guardian to contact in case of emergency:

Name _____ Relationship _____

Address _____
please include zip code

Telephone _____

Do you have any health-related restrictions or physical limitations that might affect the work that you can do? Yes No

If yes, please explain: _____

I am interested in volunteering at the Albany Public Library. I understand that my attitude and attire at the Library should be professional. I will accept assignments and supervision courteously. I will be dependable and arrive on time.

Student Volunteer Signature Date

Parent/Guardian Signature Date