

Happy Valley Library

Teen Volunteer Application

13793 SE Sieben Park Way Happy Valley, OR 97015 503-783-3454

Please select all that apply. I am interested in:

<input type="checkbox"/> Volunteering for a youth program Usually Saturday mornings, 9:45-11:15	<input type="checkbox"/> Volunteering on a Teen Board 6 th -8 th grades meet 2 nd Wed @ 5-6 pm 9 th -12 th grades meets 1 st &3 rd Thurs @ 5-6 pm
<input type="checkbox"/> Volunteering for library projects Usually Saturdays 10:30-12 or 2-3:30	<input type="checkbox"/> Hearing about teen programs.

First Name	Middle	Last Name

Mailing Address	Apt. #

City	State	ZIP

School

Phone #	Age	Grade

E-MAIL ADDRESS

Emergency Contact & Phone

Why do you want to volunteer?

Application continues on other side.

Are you required to perform service hours for a school or organization? If so, please indicate how many hours are needed and the deadline for completion.

All information in this application is true to the best of my knowledge. I understand that if I use my personal automobile to and from my volunteer assignment that I will agree to keep in effect automobile liability insurance equal to or greater than the minimum required by the state of Oregon. I understand that all information used in my volunteer role is confidential and I will respect that confidentiality. I release, indemnify and hold harmless the Happy Valley Library and the City of Happy Valley from any and all claims, actions and demands that may arise from my actions as a volunteer.

Applicant Signature (student)

Date

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If applicant is a minor, parent or guardian must agree to the above statement and sign below.

Parent/Guardian Signature

Parent/Guardian Name PRINTED

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Please contact the Happy Valley Library Youth Services Desk with any questions you may have.