Circle one **New Applicant** **Returning Volunteer**

Summer Reading Club Volunteer

2017 Teen Volunteer Procedure

1) **New Applicants must** submit a **short** essay of up to **2 pages**, either handwritten or typed, about your library story. (For example: Why is the Library important to you? How has a library book changed your life? What is your most memorable experience at the Library?) The essays will determine who will be selected to become a volunteer, so put some of your creative energy into it! Turn in your essays to the **Children's Information Desk** by **May 15.**
2) **Returning Teen Volunteers do not need to write another essay but must complete a new emergency notification form by May 15.**
3) Fill out an **emergency notification** form and turn it in with your essay. (Notification form is on the back of this application and on the website.) All teens must have parent/guardian approval.
4) Teen Volunteers must be available to work a minimum of 12 hours from June 1-August 15.

Teen Volunteer Information

Who: Teens, ages 12 to 18, who like children, books, libraries, and fun.

What: Teen Volunteers will:
Assist with Summer Reading Club (SRC)
Shelve Books
Help with Kids Programs
Help Librarians with special projects and daily duties
Join the Summer Reading Club! Have Fun!

When: If you are accepted, we will give you a call

Why: There are so many reasons why you would want to volunteer at the Bedford Public Library! Here are just a few:

- Learn about the library and check out our new books, movies, and CDs!
- Contribute to the dynamic Bedford community!
- Earn volunteer community service hours for fun or school or church!
- Gain valuable pre-employment experience
- Make new friends!

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2017 SRC Teen Volunteer
Emergency Notification Form

T-shirt size (circle one): S M L XL

Name: _____

Address/City/Zip Code:

_____

Telephone #:

_____

Email:

_____

School: **Age:** Grade:

_____

Parent/Guardian Name:

_____

Home phone #: Emergency #: Work phone #:

_____

Parent signature:

_____

IB or NHS Coordinator Contact Information: (write "N/A" if none)
Name:

_____

Coordinator Email:

_____

Allergies or Medical Conditions:_____

Do you know 2nd language, if so, which one? _____

Are you available to work a minimum of 12 hours this summer (June 1 – August 15, 2017)?

_____

Date of Birth: _____