

Date received	
Staff initials	



Date contacted	
Staff initials	

## Volunteer Application

Name		Age (if under 18)	
Address			
Phone Contact			
Email Address			

When are you interested in volunteering?

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Mornings						
Afternoons						
Evenings						

How much do you wish to volunteer?

	Specific number of hours (How many?)
	Weekly
	Monthly
	Other

(Volunteers working with youth may be required to pass a background check.)

What interests you? (Options vary by branch)

	In-branch staff support (shelving, preparing crafts, cleaning, etc)
	Teen Summer Volunteering
	Library program assistance
	Library program proposal
	MLS Student Practicum
	Friend of the Library
	ESL or Citizenship tutoring
	Book Buddies program

Summarize your skills, interests, or organizations related to volunteering. (Ex. Genealogy, National Honor Society, gaming, arts & crafts, etc.)

### Person to Notify in Case of Emergency

Name		Email Address	
Phone		Alternate Phone	

Volunteer's Signature		Date	
Parent's Signature (if under 18)		Date	



### Release of Photograph and/or Name

*Consent for publication of my name, likeness, image, photograph, videotape, film, and statement.*

I give consent to Harris County, the Harris County Public Library Director (“the Library Director”), and their agents to photograph, film, or videotape me or my child, and to use photos, digital reproductions, films, or videotapes with or without my or my child’s name, and to quote or record statements from me or my child for promotions, advertisements, publicity, and other purpose including flyers, newspapers, and websites.

I grant Harris County, the Library Director, and their agents all rights to reproduce, edit, mix, distribute, and display publicly, including on the Internet, photographs, film, videotape, and statements, and to prepare derivative works. Harris County is not responsible for unauthorized duplication or use by third parties including on the Internet. Harris County has no financial commitment to me as a result of this consent and release. I expressly waive, release, and discharge Harris County, the Harris County Public Library, and their directors, officers, employees, agents, and volunteers from all claims, causes of actions, and demands that I or my child may have against them arising from publication of my or my child’s name, likeness, or statement. This release is valid until revoked and applies to multiple times and uses. Harris County has no liability for any use made before the Library Director receives my written revocation.

**Model Name/s Print :** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

If you are under age 18, a parent or legal guardian must sign below.

*I hereby certify that I am the parent or legal guardian of the person named above and I give my consent on behalf of him or her.*

**Signature of Parent or Guardian:** \_\_\_\_\_

**Print Name:** \_\_\_\_\_

**E-Mail/Phone#:** \_\_\_\_\_

Thank you for visiting this Harris County Public Library branch.

We look forward to seeing you again soon.