

Fairhope Public Library -- Teen Volunteer Application Fall 2022

Name:		DOB:				
Phone:	Text OK?	Sc	hool:			
Email:					T-Shi	rt Size:
Mailing Address:						
City:	State:		Zip:	Age:		
Parent/Guardian Name:						
Phone:	Email	:				
Availability (circle your cho	oice):					
AM PM	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Have you volunteered at F	HPL in the past	t? Yes	No			
Preferred Work Area:	General		Children's	Children's Programs MakerSpace		
Volunteer Indemnity and I	Hold Harmless	Agreemen	it:			
Fairhope, the Fairhope Pub from and against any and a arising in any way out of m negligence or willful miscor City of Fairhope and the Fo	all liability, loss, y volunteer act nduct of the Cit	damage, a ivities exc y of Fairho	and expense of ept where such ope or the Fairh	costs (including liability responded liability	ding attorults from Library. <i>P</i>	rney's fees) the sole Please note: The
I further understand that I Fairhope Library is a smoke under the influence of alco	e-free, drug-free	e, and alco				
I understand that all library anyone's use of the Fairho					mation p	ertaining to
I understand that as a voluassigned shift or call (251-	•		•		•	•
Volunteer Signature:					Date:	
Parent Signature:					Date: _	
Parent Name (printed):					Phone:	
Tu	ırn in to the Fairho	pe Public Li	brary Youth Servic	es Departmen	ıt	

Office Use Only – Date Received: Received by:

Filed: