



NORTH HAMPTON PUBLIC LIBRARY
ADULT VOLUNTEER INFORMATION FORM

Volunteer Name _____
Address _____
Phone _____ E-mail _____
Emergency
Contact _____ Phone _____

Days/ Hours Available to Volunteer:

| | | | |
|-----------|-----------------------|----------|-----------------------|
| Monday | Hours: _____ to _____ | Thursday | Hours: _____ to _____ |
| Tuesday | Hours: _____ to _____ | Friday | Hours: _____ to _____ |
| Wednesday | Hours: _____ to _____ | Saturday | Hours: _____ to _____ |

Activities for Volunteers – check those you have an interest in:

- ☐ Housekeeping (One of our greatest needs. We have a wonderfully busy library. Help us keep it clean and looking good for our visitors.)
- ☐ Shelf reading (Making sure our books are in order so they are easy to locate)
- ☐ Book processing (Putting covers on books)
- ☐ Distribute flyers
- ☐ Home delivery to library patrons
- ☐ Leading a book group, craft or knitting group, or other group to meet at the library regularly
- ☐ Working with The Friends of the Library on projects that benefit the library.
Suggestions for events: _____
- ☐ Other: Include special skills you have or ideas for the library: _____

Please read the following agreement and sign:

I certify that the answers contained in this application are true and complete to the best of my knowledge. My volunteer service is conditional upon completion of the application and verification of the references I have provided. I am offering my services as a volunteer. I agree to keep confidential all patron information or Library records I may encounter. If my application is accepted, I agree to abide by the rules and regulations of the Library. I understand that I will not be entitled to compensation for any services I provide.

Signature: _____ Date: _____

In accordance with State Law, if you volunteer to work with children at the library, you will need to authorize and satisfy a N.H. State Criminal Record check prior to beginning volunteer service.