



# High Point Public Library & High Point Museum



## Volunteer Application

Name \_\_\_\_\_ Birthday \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

E-Mail Address (Email is our primary form of contact. Please print carefully) \_\_\_\_\_

Phone Number \_\_\_\_\_

Emergency contact person Name \_\_\_\_\_ Phone \_\_\_\_\_ Relationship \_\_\_\_\_

I am seeking this volunteer position: (check one)

\_\_\_\_ to satisfy school/class/scholarship/Community Service requirements. Hours required \_\_\_\_\_ Deadline \_\_\_\_\_

\_\_\_\_ to become a regular Library/Museum volunteer

Have you volunteered for the Library or Museum before? \_\_\_\_ Yes, at the Library \_\_\_\_ Yes, at the Museum \_\_\_\_ No

Have you ever been convicted of a  felony or  misdemeanor requiring imprisonment or fine in excess of \$50?

If yes: name the county \_\_\_\_\_ and state \_\_\_\_\_

If no: check here

Are you under 18 years of age (circle one)      Yes                      No

Parent/Guardian Signature (Required for minors) \_\_\_\_\_ Date \_\_\_\_\_

### Availability

Select **at least three (3)** choices, with at least one of those choices during the week, as time slots fill fast.

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
<input type="checkbox"/> 9-11 am	<input type="checkbox"/> 9-11 am	<input type="checkbox"/> 9-11 am	<input type="checkbox"/> 9-11 am	<input type="checkbox"/> 9-11 am	<input type="checkbox"/> 9-11 am	
<input type="checkbox"/> 11-1 pm	<input type="checkbox"/> 11-1 pm	<input type="checkbox"/> 11-1 pm	<input type="checkbox"/> 11-1 pm	<input type="checkbox"/> 11-1 pm	<input type="checkbox"/> 11-1 pm	<input type="checkbox"/> 1:30-3:30 pm
<input type="checkbox"/> 1-3 pm	<input type="checkbox"/> 1-3 pm	<input type="checkbox"/> 1-3 pm	<input type="checkbox"/> 1-3 pm	<input type="checkbox"/> 1-3 pm	<input type="checkbox"/> 1-3 pm	<input type="checkbox"/> 3:30-5:30 pm
<input type="checkbox"/> 4-6 pm	<input type="checkbox"/> 4-6 pm	<input type="checkbox"/> 4-6 pm	<input type="checkbox"/> 4-6 pm	<input type="checkbox"/> 4-6 pm	<input type="checkbox"/> 4-6 pm	
<input type="checkbox"/> 6-8 pm	<input type="checkbox"/> 6-8 pm	<input type="checkbox"/> 6-8 pm	<input type="checkbox"/> 6-8 pm			

I agree to abide by the policies and procedures of the High Public Library and/or the High Point Museum (depending on where I do my volunteer work).

Signature \_\_\_\_\_ Date \_\_\_\_\_

Physically return completed application to the library or mail it to:

Jo Williamson  
High Point Public Library  
P.O. Box 2530  
High Point, NC 27261

Email/call with any questions:  
jo.williamson@highpointnc.gov  
336.883.3521