



Tuscaloosa Public Library Community Service and Volunteer Form

Please Select

Community Service (**required** by school, organization, or court system)

Organization Name _____ Hours assigned _____

Volunteer (You must be at least 15 to volunteer. Volunteers under 18 must have a parent/guardian complete the consent section of this application. Age if under 18 ____.)

TPL Branch Preference

___ Main ___ Weaver Bolden ___ Brown

Personal Information

Name: _____

Address: _____

City/State/Zip: _____

Email: _____

Contact Number: _____

In case of emergency, notify (Name) _____

Telephone: _____

Disclaimer

I, _____, shall indemnify and hold harmless Tuscaloosa Public Library, its officers, employees and assigns from and against all claims, damages, losses or expenses arising out of participation as a volunteer, and understand that as a volunteer that I am not covered in any way through Tuscaloosa Public Library insurance. I also give my permission to use any photographs taken of me for marketing or other purposes.

Applicant Signature: _____ **Date:** _____

Parent/Guardian Consent

I give permission for the above applicant to volunteer at the Tuscaloosa Public Library for a maximum of ____ hours per week (3 hours a minimum).

Parent/ Guardian Signature: _____ Date: _____

Parent/ Guardian Printed Name: _____

Please email, mail or fax service application to:

Pamela Williamson, Associate Director of Youth & Community Services
Tuscaloosa Public Library
1801 Jack Warner Parkway
Tuscaloosa, Alabama 35401
Phone 205.345.5820 fax 205.758.1735
pwilliamson@tuscaloosa-library.org

