



Name: _____



Volunteer at the Library!

The Library needs your help
throughout the school year!

Fill out an application
and return it to the
Library!

Anyone entering 6th
grade through 12th grade
is welcome to apply!



Name: _____

Volunteer Opportunities 2022-2023

- Junior Volunteer Meetings*** Thursdays at 3:30pm
Junior Volunteers meet weekly to plan and prepare for community service projects of their own choosing. Have an idea or want to help? Come to one of the meetings!
- Program Prep*** Mondays at 3:30pm
Help the Library prepare supplies for programs and displays in the Library. Duties may include organizing, cleaning, folding, cutting, painting, filming clips for the Library's social media, or preparing seeds for the Seed Library. Artistic, dexterous, and self-motivated volunteers are desired.
- Program Assistance*** some Tuesdays at 3:30pm
Help at children's programs like Tinker Tuesday. Duties include assisting with crafts and STEM projects, supervising children/crowd control, setting up and cleaning up the activities. Program assistance opportunities are available only as assistance is needed. Program assistance opportunities will be emailed to Junior Volunteers with active applications and posted in the Junior Volunteer Sign-In Binder.

If those opportunities don't work with your schedule, you can schedule a book cleaning shift or create a book review bookmark. These volunteer opportunities, listed below, are options you can do independently.

- Book Cleaning**
Help keep our Library tidy by cleaning books. Sign up for a book cleaning shift and work independently to clean a cart of books. Each book needs to be wiped down front and back and dried off before it's ready to go back on the shelf. Book cleaning shifts can be flexible but cannot exceed one hour per week. Email Ms. Tara to schedule your initial training and weekly shift. If you cannot make it to your shift, please notify Ms. Tara by email or phone. If you miss three shifts without notifying us, you will be removed from the schedule.
- Book Review Bookmarks**
Earn 2 hours of volunteer credit by writing a book review and formatting it as a bookmark. To be clear, you are NOT getting volunteer hours for reading, you are getting volunteer hours for writing a book review that can be shared with other library patrons! Book reviews must be about a book in the teen section of the Coronado Public Library. Nonfiction and graphic novel reviews welcome! Book reviews must comply with the Book Review Bookmark Writing and Formatting Guide to get credit for volunteer service. Pick up the Book Review Bookmark template in the teen library or email Ms. Tara for a digital version.

Have a different idea for volunteering? Talk to Ms. Tara or Ms. Jennifer and we can discuss.

Ms. Tara: tdavies@coronado.ca.us 619-522-2488

Ms. Jennifer: jherring@coronado.ca.us 619-522-2489

**Drop-in volunteer opportunities: This means you do not have to sign up to attend, you can come when it works for you, and you do not need to notify the Library when you can't make it.*

Junior Volunteer Application 2022 - 2023

The Coronado Public Library is looking for qualified volunteers to assist with library programs and services. Volunteers should want to work with the community, have good organization and communication skills, and be excited to promote library services to our community.

Requirements to be a Junior Volunteer:

- Be entering 6th grade through 12th grade.
- Have an email address where we can contact you (it can be a parent's).
- Have a US phone number so that we can contact your parents in an emergency.

Name: _____ **Birthdate (MM/DD/YY):** _____ **Grade:** _____

Address: _____ **City:** _____

Parent Cell Phone: _____ **Volunteer Cell Phone:** _____
If Applicable

Email Address: _____
Please indicate Parent/Volunteer or both

Why would you like to volunteer for the library? _____

Volunteer Agreement

Please write your initials on the line next to each statement indicating that you have read and agreed to our policies.
I, _____ (full name),

_____ Will be punctual for all shifts, and I will give notice to the library as soon as possible if a problem arises which would prevent me from performing my duties.

_____ Will show respect towards my leaders, peers and the children with whom I work.

_____ Will complete tasks assigned to me to the best of my ability, obeying all library rules and staff instructions.

_____ Will make efficient use of my time by seeking out ways in which I may help others after completion of my own responsibilities.

_____ Will be enthusiastic about volunteering; and will dress appropriately and maintain a neat appearance.

Teen Signature _____ **Date** _____

Once we have your application, we will email you about new volunteer opportunities as they become available. If you have an idea of a different way you would like to volunteer for the library, please let us know!



**CITY OF CORONADO
CORONADO PUBLIC LIBRARY JUNIOR VOLUNTEER FORM
PARTICIPANT INFORMATION FORM**

Personal Information

Child's Name _____
 Age _____ Date of Birth _____
 Parent/Guardian Name _____
 Cell Phone: _____
 Parent/Guardian Name _____
 Cell Phone: _____
 E-mail Address _____

Emergency/Medical Information

Please list an emergency contact ~~in the event that~~ neither parent can be reached.
 Emergency Contact: _____
 Relationship: _____
 Cell Phone: _____
 Does your child have any allergies or special needs that we need to be aware of? ____ Yes ____ No If yes, please explain: _____

 Does your child take medications? ____ Yes ____ No If yes, please explain: _____

AUTHORIZATION OF TREATMENT OF A MINOR AND HOLD HARMLESS

This form signed by you authorizes emergency medical treatment for a minor child in case of necessity. Should it be necessary for you to be away from home it can authorize the City of Coronado to act for you. (I)(We) the undersigned, parent(s) or legal guardian of the above child, a minor, do hereby authorize THE CITY OF CORONADO and/or any California Hospital as agents for the undersigned to consent, in advance of any specific diagnosis, to any x-ray examination, anesthetic medical or surgical diagnosis or treatment and hospital care which is deemed advisable by, and is to be rendered under the general or specific supervision of any physician and surgeon licensed under the provisions of the Medical Practice Act on the medical staff of any California Hospital, whether such diagnosis or treatment is rendered at the office of said physician or at said hospital. This authorization is given pursuant to Section 1283 of the Health and Safety Code of California and shall remain effective until revoked in writing by parent/guardian. I will not hold the City of Coronado responsible for any damage arising from any injury that might be received while participating in activities of the City of Coronado Public Library Department.

Signature
 Signature of Participating Adult, Parent or Guardian _____ Date _____

Printed Name
 Name of Participating Adult, Parent or Guardian _____ Date _____

NAME AND LIKENESS RELEASE

In further consideration of participation in the City of Coronado Public Library Programs, I agree that the City of Coronado and its officers, agents, or employees may use my appearance, name, and likeness in connection with my participation in any City of Coronado publication, including news release, without my prior consent. I further agree that I am not entitled to any compensation for such use of my appearance, name, and likeness.

Signature
 Signature of Participating Adult, Parent or Guardian _____ Date _____