

Lake Agassiz Regional Library Volunteer Application

Name: _____ Phone: _____ Date: _____
Address: _____ City: _____ State: _____ Zip: _____

Please check Library (or Libraries) in which you'd like to volunteer:

- | | | | |
|-----------------------------------|---|---|---------------------------------------|
| <input type="checkbox"/> Ada | <input type="checkbox"/> Bagley | <input type="checkbox"/> Barnesville | <input type="checkbox"/> Breckenridge |
| <input type="checkbox"/> Climax | <input type="checkbox"/> Crookston | <input type="checkbox"/> Detroit Lakes | <input type="checkbox"/> Fertile |
| <input type="checkbox"/> Fosston | <input type="checkbox"/> Hawley | <input type="checkbox"/> Mahnomen | <input type="checkbox"/> McIntosh |
| <input type="checkbox"/> Moorhead | <input type="checkbox"/> Mobile Library | <input type="checkbox"/> Regional Offices | |

Please check service or program you are interested in:

- Children's programming
- Book Discussion Group
- Friends of the Library
- Adult programming
- Summer Library program
- Book Sales
- Fund raising
- Book shelves/maintaining order
- Homebound delivery
- Displays/Art projects
- Other

List your training or skills that qualify you for this activity:

Have you worked in a library before (circle one): Yes/No

If yes, which library: _____

What days are you most available:

- | | | |
|-----------|-------|-----------|
| Sunday | _____ | a.m./p.m. |
| Monday | _____ | a.m./p.m. |
| Tuesday | _____ | a.m./p.m. |
| Wednesday | _____ | a.m./p.m. |
| Thursday | _____ | a.m./p.m. |
| Friday | _____ | a.m./p.m. |
| Saturday | _____ | a.m./p.m. |

If you are only interested in special events, please indicate which ones:

Signature: _____