

DAVIE COUNTY  
PUBLIC LIBRARY



Preserving the Past  
Realizing the Future

371 Main Street  
Mocksville, North Carolina 27028  
336-753-6030  
On the web at: [library.daviecounty.org](http://library.daviecounty.org)

Date: \_\_\_\_\_ **Davie County Public Library Youth Volunteer Application Form**

If you are interested in volunteering for DCPL, please fill in the application below and return it to the library. We will then work together to create a work schedule for you.

It is essential that a parent or responsible adult be reachable during the time you volunteer in case of illness or emergency.

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Name: \_\_\_\_\_ Age: \_\_\_\_\_

Address: \_\_\_\_\_

Parent's Phone: \_\_\_\_\_ Volunteer's Phone: \_\_\_\_\_

School and Grade in fall: \_\_\_\_\_

Parent Name(s): \_\_\_\_\_

Parent's Address: \_\_\_\_\_

Email: \_\_\_\_\_ Parent's Email: \_\_\_\_\_

During the time my child is scheduled to volunteer at the library I may be reached at:

\_\_\_\_\_

If I am not available in case of emergency please contact:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_

I give permission for my child to volunteer at the Davie County Public Library.

Parent signature: \_\_\_\_\_ (date) \_\_\_\_\_