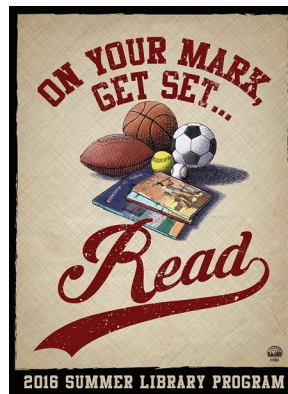


We need Summer Volunteers at the Camas Public Library!

It's time to sign up as a 2016 Summer Reading Program Volunteer!

Can YOU help??



Volunteers will:

Sit at the SRP table while signing participants up, logging reading times, and issuing prizes.

Volunteers must:

- Turn in application by May 23rd.
- Be able to quickly learn our internet computer program.
- Have an email address that is checked regularly.
- Attend a 90-minute training (the choices are Thurs June 2nd or Fri June 3rd @ 3:30-5pm)
- Enjoy talking to kids.
- Be punctual and friendly.
- Love reading!

Who:

Adults, & teens at least 13 yrs. old

Commitment:

At least four hours a week
(but more if you want!)

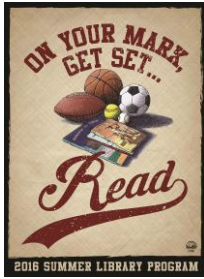
When:

June 4th – August 13th (10 weeks)
M-W 10am-8pm, Th-Sa 10am-6pm

To become a volunteer:

Contact Ellen Miles, Youth Services Librarian: emiles@cityofcamas.us or 360-834-4692 x4703.

Applications are due Mon. May 23rd.



Camas Public Library 2016 Summer Reading Program

Volunteer Application

Application deadline: May 23rd

Training is: Thurs 6/2/15 **or** Fri 6/3/15 @ 3:30-5pm

We ask you volunteer for a minimum of 4 hours a week.

Name: _____
(first) (middle) (last)

Mailing Address: _____

City: _____ State: _____ ZIP: _____

Home or Cell Phone: _____

Email: _____

Have you volunteered with us before for the Summer Reading Program? (circle) Yes No

Are you 18 years of age or older? (circle) Yes No

Fill out this section only if you are under 18.
How do you plan on getting to the library for your shifts? (circle) my car my parents
the bus other _____

Fill out this section only if you are 18 or older. This info required for the mandatory background check, as you will be working around children.
Date of Birth: _____ Gender: _____ Race: _____
Alias/Maiden Name(s), if applicable: _____

As a volunteer for the City of Camas, I will use all provided equipment appropriately and follow all safety practices. I am aware that the work associated with being a City volunteer involves certain risks of physical injury or death. Being fully informed as to these risks and in consideration of being given the opportunity to participate in the City's volunteer program, I hereby, on behalf of myself and my heirs, assume all risks in connection with my participation in the program, and I further hold harmless the City of Camas, it's officials, employees, and agents for any injury or damages which may occur to me while I am participating in this program, and I waive my right to bring claim or lawsuit against them for any such injury, damage, or death. Furthermore, I agree to hold harmless, defend and indemnify the City of Camas, it's officials, employees and agents from any and all claims and lawsuits for injury, loss, or damage to other persons or entities which may arise in the future as a result of or in connection with my participation in the volunteer program except for injuries or damages caused by the sole negligence of the City. I authorize any necessary emergency medical treatment that might be required for me in the event of physical injury and/or accident to me while participating in this program. I agree to be the party responsible for all medical expenses which are incurred in my behalf. I also give the library permission to take pictures of me participating in library events. These photos may be used for publicity, which may include the library's website.

Signature: _____ Date: _____

Turn completed application in to the library, or scan and email it to Ellen Miles, Youth Services Librarian at emiles@cityofcamas.us.
Questions? Call 360-834-4692 x4703