# Volunteer Application

Wabeno Public Library, 4556 N. Branch St., Wabeno, WI 54566

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|  | |
| Name |  |
| Date of Birth |  |
| Address |  |
|  |  |
| **Phone** |  |
| **Email** |  |
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| --- | --- | --- | --- |
| **Availability** | | | |
| **Tuesday** |  | To |  |
| **Wednesday** |  | To |  |
| **Thursday** |  | To |  |
| **Friday** |  | To |  |

**Why are you interested in volunteering at the Wabeno Public Library?**

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## Terms and Conditions

## My services to the Wabeno Public Library are provided strictly in a voluntary capacity as a volunteer and without any express or implied promise of salary, compensation, or other payment of any kind whatsoever, and are furnished without any employment-type benefits, including but not limited to employment insurance programs, unemployment compensation, workers’ compensation, vacation and other paid time accruals.

## I will familiarize myself with and comply with the Wabeno Public Library policies and procedures applicable to volunteers found in the Wabeno Public Library Volunteer Handbook.

## I understand that I may have access to confidential information and agree to maintain and keep all such information confidential. Improper disclosure of confidential information may result in disciplinary action including suspension and/or termination of my volunteer participation at the Wabeno Public Library. For more information on the Confidentiality of Library User Records, go to <https://shorturl.at/8ekOF>.

## I understand that I will be responsible for my own transportation to and from the Wabeno Public Library.

## Release

## I understand and recognize that there may be potential hazards associated with being a volunteer, and that it may expose me to personal injury, including death, or may result in damage to my personal property. I agree to assume those risks and responsibilities and hereby release and forever discharge and hold harmless the Wabeno Public Library, its director, and employees from any and all liability, claims, demands of whatever kind of nature, which may arise or may hereafter arise from my participation in this Activity. I understand this Release discharges the Wabeno Public Library from any liability or claim that I may have against the Wabeno Public Library with respect to bodily injury, personal injury, illness, death, property loss, or property damage that may result from my assignments with the Wabeno Public Library. I also understand that the Wabeno Public Library does not assume any liability for or obligation to provide financial assistance or other assistance, including but not limited to medical, health, or disability insurance in the event of injury or illness.

## I am voluntarily providing service to the Wabeno Public Library, without pressure and/or coercion. I agree that I am performing this service for educational, civic, charitable, or humanitarian reasons. I am providing service without expectation of payment or reimbursement. I understand that the work I perform will in no way be construed as an obligation to provide me with future paid employment, either permanent or temporary. I further understand that I am not covered by the Wabeno Public Library’s insurance including but not limited to medical, health, property, liability insurance, and workers’ compensation benefits. I agree that my Assignment at the Wabeno Public Library may be terminated at any time by the Wabeno Public Library or by me.

## I hereby give the Wabeno Public Library permission to use their best judgment in obtaining medical service for me to render medical treatment for a medical emergency injury and/or illness. I permit the Wabeno Public Library to contact the following person(s) as emergency contacts:

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| --- | --- | --- | --- |
| Name |  | Phone Number |  |
|  |  |  |  |
| Name |  | Phone Number |  |

## By initialing this agreement, I agree to be photographed, videotaped, and/or recorded while volunteering with the Wabeno Public Library. I understand that this media, in whole or in part, may be used for the Wabeno Public Library website (wabenopl.org), social media, grant proposals, and other promotional materials to support the Wabeno Public Library and its programs. If I no longer want my photos and/or story to be used, I agree to contact the Wabeno Public Library director at [director@wabeno.lib.wi.us](mailto:director@wabeno.lib.wi.us) or 715-850-3044.

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| **Initials** |  |

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| **I certify that I have read and Understand the above Terms and Conditions and Release.** | |
| Participant Signature |  |
| Date |  |
| Parent/Guardian Signature (if participant is under 16) |  |
| Date |  |

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| **LIBRARY USE ONLY** | | | | | |
| Application Date |  | Start |  | End |  |
| Director Initial |  | | | | |