

# VOLUNTEEN RELEASE AGREEMENT

Name: \_\_\_\_\_ Tel#: \_\_\_\_\_

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

Email: \_\_\_\_\_

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

Hobbies/favorite books:

\_\_\_\_\_  
\_\_\_\_\_

Signature of applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Emergency Contact (Name): \_\_\_\_\_

Home Tel#: \_\_\_\_\_ Work Tel#: \_\_\_\_\_

If applicant is a minor, legal guardian or parent authorization is required:  
I, \_\_\_\_\_, acknowledge that I am the legal guardian or parent of \_\_\_\_\_, and do hereby authorize him/her to work at **West Palm Beach Public Library**. I understand that this is volunteer work for which no compensation is provided. I also understand that any breach of standards and/or policies of the Library System may result in termination of his/her participation in the program. Furthermore, I release the West Palm Beach Public Library, its employees, sponsors, and other volunteers of this program/event from any liability due to any negligence or carelessness on the part of all persons named above.

Date: \_\_\_\_\_

Print name (Parent/Guardian)

\_\_\_\_\_  
Relationship

\_\_\_\_\_  
Signature (Parent/Guardian)

West Palm Beach Public Library  
411 Clematis Street  
West Palm Beach, Florida 33401  
561.868.7705