



Williamson Public Library  
6380 Route 21, Suite 1  
Williamson, New York 14589-9560  
Telephone 315.589.2048  
FAX 315.589.5077  
WilliamsonLibrary.org

## STUDENT VOLUNTEER PERMISSION FORM

\_\_\_\_\_ has my permission to volunteer at the Williamson Public Library. I have read the information below and am aware of my child's possible volunteer duties and expected rules of behavior based on the Library's Rules of Conduct. I hereby indemnify and hold harmless the Williamson Public Library, its employees, board, or agents from any liability for accidents, injuries, or illness that may occur to my child from his or her participation in the Library Volunteer Program. The library does not act in loco parentis.

In case of emergency, please contact:

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

Relationship: \_\_\_\_\_

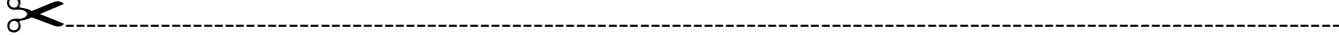
Phone: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Print: \_\_\_\_\_

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

*Please return permission form to the volunteer coordinator and cut off the bottom half for your own records.*



Dear Parent or Guardian:

Your teen has expressed interest in volunteering at the public library. They will do light cleaning, help maintain the proper order of materials on the shelves, decorate our teen area, and perform various other tasks assigned by the volunteer coordinator, Kate Karnisky. Your teen may volunteer up to 20 hours total to fulfill graduation requirements, if the arrangement is beneficial for both the library and the student.

If, for whatever reason, your teen does not appear for their scheduled time, the library board and staff are not responsible for their whereabouts. Your teen will **not** be penalized they cannot make a scheduled time, but communication with the supervisor is greatly appreciated. Please be aware that your teen will be under the direction of the volunteer coordinator, but will need to perform their tasks independently and responsibly.

Thank you so much for your cooperation!

Sincerely,  
The Staff of the Williamson Public Library