



Rancho Cucamonga Library Services

Student Volunteer Application

(12 to 17 years of age)

DATE: _____

Thank you for your interest in volunteering at the Rancho Cucamonga Public Library!
Please note the following guidelines for volunteering:

- Notification about volunteer opportunities may be provided via text and email.
- Orientation and training will be provided for all positions.
- 15 hours is required for community service requirement approval and signoff.
- The library does not accept court referrals.

NAME: _____ DOB: _____
Last First

ADDRESS: _____
Number & Street Name Apt. # City Zip Code

HOME PHONE: _____ EMAIL: _____

CELL PHONE: _____

Please check positions of interest

(minimum age requirements)

- ___ **Shelving Assistant (14):** Shelve materials and keep areas neat and orderly.
- ___ **Special Event Assistant (12):** Assist with programs and events including set up, clean up, taking tickets, monitoring crowds, and managing games, crafts, and activities.
- ___ **Summer Reading Program Assistant (SRP) (12):** Work at the SRP table in the Children's Area where you'll register children for the program, explain rules and guidelines, and distribute weekly prizes.
- ___ **Teen Advisory Group Member (TAG) (12):** Meet monthly with library staff to advise, recommend and assist with teen services and programs.
- ___ **Back to Basics Reading Tutor (16):** Provide tutoring instruction and basic reading skills practice to a small group of children ages 7 to 12 (curriculum materials provided).

Please circle your preferred volunteer location

Archibald Library Paul Biane Library No preference

(Over, please)

City of Rancho Cucamonga
Volunteer Services Agreement
Release of Liability and Assumption of Risk

I, _____, hereby acknowledge that I have voluntarily applied to participate in performing library assigned duties and services for the City of Rancho Cucamonga. I am voluntarily participating in these activities with the knowledge that there is some risk that I may be injured in the course of performing these services. I understand that the City's policy is to cover volunteers as employees of the City for purposes of Worker' Compensation benefits. I also understand that under Workers' Compensation laws and Workers' Compensation benefits will be the sole and exclusive remedy in the event I am injured while performing these volunteer activities and services.

With the exception of Workers' Compensation benefits, I hereby agree that I, my heirs, guardians, legal representatives and assigns will not make a claim against or file an action against the City of Rancho Cucamonga, its officials, officers, employees, or agents for injury, illness or damage resulting from negligence, howsoever caused, by any official, officer, employee, or agent of the City of Rancho Cucamonga as a result of my participation in the volunteer activity or service. In addition, I hereby release and discharge the City of Rancho Cucamonga, its officials, officers, employees and agents from all actions, claims, demands that I, my heirs, guardians, legal representatives or assigns now have or may hereafter have for injury or damage resulting from my participation in these volunteer activities or services.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT. I FULLY UNDERSTAND ITS TERMS. I UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND I SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT

Date: _____

Signature

Print Name

Signature of Parent or Guardian

Print Name of Parent or Guardian