



Taber Public Library
5415 50 Avenue, Taber, Alberta, T1G 1V2
P: 403-223-4343 | F: 403-223-4314 | E: help@taberlibrary.ca

Volunteer Application

Contact Information

Name: _____

Phone Number: _____

Email: _____

Preference for contact via: Phone Email

Availability

Date you are available to start volunteering: _____

Write when you would be available to come in to volunteer in the spaces below:

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

Interests

Let us know what some of your interests and hobbies are:

Select which volunteer task you'd be interested in doing:

- Shelving library materials.
- Shelf reading.
- Delivering library materials to home-bound patrons.
- Set-up/take-down of one-off events such as our book sale, Christmas and International Literacy Day programs.
- Running after school programs for children and teens.
- Special programs/projects such as building parade floats and felt-board story sets.



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References

Please provide us with three references, either professional or personal.

1. Name: _____
Phone Number: _____
E-mail: _____

2. Name: _____
Phone Number: _____
E-mail: _____

3. Name: _____
Phone Number: _____
E-mail: _____

Is there anything else you think we should know?

Thank you for your interest! A library staff-member will be in touch with you to set up an orientation.