



FRIENDS

Forsyth County Public Library

VOLUNTEER APPLICATION

_____ Date

FIRST NAME _____ LAST NAME _____

STREET ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE (home) _____ (cell) _____

EMAIL #1 _____

EMAIL #2 _____

EMERGENCY CONTACT (name) _____ (Phone Number) _____

BIRTHDAY MONTH _____

LOCATION PREFERENCE _____ Cumming store _____ Post Road store _____ Sharon Forks store

Please mark ALL days/times you would be available for store shifts or events.

DAY	MORNINGS	AFTERNOONS	EVENINGS
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday			
Sunday			

_____ I can help in shipping area (Post Road Library Basement)

_____ I can help restock the Self-Serve Shelves and process donations at Hampton Park

_____ I can help with special events (Barnes and Noble gift wrap, Senior Expo, Forsyth Reads)

_____ I can help with the PopUp stores (approx. 4 times a year in the community)

OTHER AREAS OF NEED

_____ Creating monthly newsletter

_____ Updating the website

_____ Sending out membership letters

_____ Posting Social Media

_____ Volunteer Luncheon Committee