

**Friends of the Library  
MRCPL  
Volunteer Information Sheet**

**Please Print.**

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

Name: \_\_\_\_\_  
                    (Last)                      (First)                      (Middle)

Name you prefer to be called: \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Primary Phone: \_\_\_\_\_ Land Line/Cell   Text option? \_\_\_Yes \_\_\_No

Secondary Phone: \_\_\_\_\_ Land Line/Cell   Text option? \_\_\_Yes \_\_\_No

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

Preferred Method of Communication:   Phone   Text   Email   Other \_\_\_\_\_

**Volunteer Preferences:**

\_\_\_\_\_ Prefer to work monthly sales   \_\_\_\_\_ Prefer to work behind the scenes/setup   \_\_\_\_\_ Both

\_\_\_\_\_ Willing to work at random "pop-up" sales (schedule permitting)

Preferred times to volunteer:   Morning                      Afternoon                      Evening

                    On:   Monday   Tuesday   Wednesday   Thursday   Friday   Saturday

I prefer to volunteer:   Occasionally           Year-round           Summers Only

Notes:

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Are you a member of the Friends of Library? \_\_\_Yes \_\_\_No

Are you a Board Member for the Friends of the Library \_\_\_Yes \_\_\_No

Special Skills, knowledge or interests:

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Can add any other pertinent information on back of this form. Thank you.