



Manatee County Public Library Volunteer Application

TEEN Volunteer Service Agreement - 13-17 Years of Age

I am the guardian of the undersigned volunteer who is under eighteen years of age. I am of sound mind and body and am fully aware of and understand the conditions of the voluntary work that will be performed for the Manatee County Library department.

In consideration of the opportunity afforded to my charge to participate voluntarily in Manatee County activities, and in recognition of the possible injury or liability to which the volunteer may subject himself/herself, I on my own behalf and as guardian of my charge and on that minor child's behalf, and our heirs, executors, administrators and successors and assigns hereby knowingly, freely and voluntarily waive any right or cause of action, whatsoever, arising as a result of such activities from which any liability or injury may or could accrue to the Board of County commissioners of Manatee County, Florida, or their agent or employees individually, except for actual medical expenses that might be incurred as a result of personal injury caused by the negligent or intentional acts of County employees as provided by Florida Law.

I, on my own behalf and on the minor child's behalf, understand and agree that his/her voluntary participation in Manatee County activities does not entitle him/her to any compensation or other employment benefits. I, on my own behalf and on the minor child's behalf, further understand that he/she is NOT an agent or employee of Manatee County, Florida, and that he/she will not so represent himself/herself to any person, government unit or corporate entity. I, on my own behalf and on the minor child's behalf, further understand and agree that he/she will be solely responsible for his/her actions while participating in volunteer activities.

I, on my own behalf and on the minor child's behalf, further understand and agree that voluntary participation in the aforementioned activities is subject to termination at any time by Manatee County for any reason or no reason at all without notice, and that the volunteer is not entitled to any recourse, nor will I seek any recourse on my own behalf and as guardian of the minor, on the minor child's behalf, in the event of such termination.

This WAIVER shall be determined to be and shall be a complete bar to any action which might otherwise be brought either by law or under any state or federal statute for the property injuries arising as a result of voluntary participation in the activities contemplated herein except for those benefits afforded volunteers in accordance with Florida Workers' Compensation Law.

All agreements and understandings between the undersigned and Manatee County, Florida, are embodied herein, and this WAIVER covers all injuries and all the effects and results, and all expenses of every nature. The statements and agreements herein are not merely recital but are contractual in nature.

Signed the _____ day of _____, 20_____.

Signature of Guardian

Signature of Volunteer

Signature of Witness

Signature of Authorized Manatee County
Representative, Department Director

Print Volunteer Name: _____ Phone Number: _____

Print parent or guardian name: _____

Address: _____ City: _____ State: _____ Zip: _____



Welcome!

Today's Date: _____

Name: _____

Birth Date: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____

E-mail: _____

Emergency Contact: _____

Emergency Telephone: _____

Any physical restrictions? No Yes _____

Why did you choose to volunteer at the library?

Personal or community interests:

Experience:

Audio/visual equipment Office equipment

Book repair Phone skills

Computers Shelf reading

Filing Shelving

Other: _____

Languages: _____

What day do you prefer to volunteer?

- Monday
- Tuesday
- Wednesday
- Thursday
- Friday
- Saturday

What time do you prefer to volunteer?

- Morning
- Afternoon
- Evening

Season?

- Winter
- Spring
- Summer
- Fall

At which library do you prefer to volunteer?

- Braden River
- Central
- Island
- Palmetto
- Rocky Bluff
- South Manatee

Assigned Branch(es): _____

Confidentiality and Manatee County Waiver Forms must be signed before starting work.



Confidentiality

I have been informed and understand that all information regarding patrons of the Manatee County Public Library System is privileged and confidential. I have been informed and understand that any person who releases or reveals such confidential information may be held in contempt of court, liable for a criminal penalty and may be civilly liable to any person harmed by the release of such information (*F.S. 257.261*).

I agree to treat any such information regarding Manatee County Public Library System patrons that should come to my attention and knowledge as privileged and confidential, and that I will not reveal or disclose such information to anyone other than authorized persons.

Date _____

Print Name _____

Signed _____

Witness _____