

Buda Public Library Volunteer Application

Name _____

Address _____ City _____ Zip Code _____

Phone number _____ Email _____

Reason for volunteering:

School assigned (disciplinary) _____ School assigned (non-disciplinary) _____

Court assigned _____ Voluntary _____

Other (please specify) _____

Number of hours needed: _____ Needed by _____

What do you have experience with?

_____ Computers (specify programs): _____

_____ Shelving books

_____ Crafts

_____ Housekeeping

Have you ever worked in a library as a staff member or as a volunteer? _____

Would you prefer to work directly with the library users? _____

Do you have any physical limitations? _____

Signature

Date

Staff Review:

Signed Agreement _____ Documentation _____ Scheduled _____

Other _____

Volunteer Agreement

Volunteers are recognized by the public as representatives of the library and shall be guided by the same work and behavior codes as library employees. This includes being respectful to all library staff and patrons, dressing appropriately, and working diligently at assigned tasks.

Volunteers must be at least 13 years of age, unless approved by the Director or Assistant Director.

Volunteers completing court or school-ordered restitution will be required to provide a copy of their paperwork from the court or school detailing the offense and community service hours required. This will be required for each separate offense.

Library staff will schedule volunteers based on the library's need for volunteers, starting with up to a two (2) hour shift.

Once a volunteer is scheduled, library staff save the time slot and design duties for that individual. If you are not able to come when scheduled, please call the library at least an hour before your assigned time. Volunteers that repeatedly do not come at their assigned times with no prior notice will not be put on the schedule.

Volunteers will put their cell phones, mp3 players, and all other personal belongings in the office before signing in. If there is a situation where a volunteer needs to keep a phone on their person, it needs to be discussed with the Director or Assistant Director before signing in.

I understand and agree to follow these guidelines. I understand that infractions of these guidelines may result in not being permitted to volunteer for the Buda Public Library in the future.

Volunteer

Parent (if volunteer is under 18 years of age)



City of Buda

405 E. Loop Street, Buda, Texas 78610

Phone : 512-312-0084 Fax: 512-312-1889

**CITY VOLUNTEER RELEASE, WAIVER OF LIABILITY &
PARENTAL/GUARDIAN CONSENT**

I hereby request that the City of Buda, Texas ("City") allow me as the Volunteer to volunteer my time, talent and abilities to assist the City of Buda, Texas in carrying out its mission of service to the citizens of Buda. As consideration for the City allowing me as the Volunteer to serve as a volunteer, I hereby agree as follows:

I acknowledge and agree that I, as a Volunteer, am not an employee of the City. Under no circumstances will I, as a Volunteer, represent that I am an employee of the City. Any and all of the activities that I, as the Volunteer, shall perform will be as a volunteer only. I understand and agree that I, as the Volunteer, will not receive any form of compensation or remuneration for these volunteer services. I also understand and agree that I, as the Volunteer, am not entitled to any employee benefits from the City. I understand and agree that the City may, at its discretion, discontinue the Volunteer's services at any time with no prior or written notice and without cause or reason. I also disclaim any ownership interest in anything I produce as a city volunteer.

If any activity to which I as the Volunteer am assigned presents risks that I do not want to take, then it is my responsibility to state that concern to the applicable City employee or the volunteer coordinator at the volunteer site and announce the decision not to engage in that activity. I agree that I shall abide by all safety rules that are applicable at the site at which I will be performing volunteer duties, will properly use any personal protective equipment that may be provided, and will always perform volunteer activities in a safe and prudent manner.

I agree that I will abide by the policies and directives of the City, as well as all applicable statutes and ordinances. I authorize that the City may seek emergency medical treatment on behalf of me in case of any accident, injury, or illness that should occur involving me as the Volunteer. I agree that I accept and assume the risk and responsibility for harm, injury, or damage that may occur to me as a volunteer while performing volunteer activities. **I expressly agree to indemnify and hold harmless the City from any and all obligations and liabilities related to any harm that may come to me. I hereby release the City of Buda and its officials, officers, directors, employees, advisors, agents, representatives, patrons, and volunteers from any liability for any cost, loss, or damage to me or my property arising out of or in connection with my activities and/or time spent in connection with the volunteer work.**

In consideration for I, as the Volunteer, being allowed to provide volunteer services for the City, I do of my own free will knowingly execute this Volunteer Agreement and Release which I have read and fully understand. I understand that information from my application and resume may be subject to release to the public under the Texas Public Information Act.

A. Acknowledgement of Risks

1. I fully understand and hereby acknowledge activities such as performing as a city volunteer has inherent risks, dangers, and hazards; and
2. My participation as a volunteer may result in injury, illness, or death; and
3. These risks may be the result of inherent risks from participation, or may even be caused by the negligence or other acts of the city, officials, officers, directors, employees, advisors, agents, representatives, patrons, and volunteers.

B. Assumption of Risks

1. I hereby assume all risks of danger or injury to myself from performing as a volunteer; and
2. I hereby assume responsibility for all losses or damages involving myself, regardless of cause.

C. Release from Liability

1. **I hereby voluntarily waive, release, discharge, hold harmless, defend and indemnify the City of Buda, its officials, officers, directors, employees, advisors, agents, representatives, patrons, and volunteers, from any and all claims, actions or losses for bodily injury, property damage, wrongful death, loss of services, or otherwise, which may arise from my participation in Volunteer Day.**

2. **I specifically understand and acknowledge that I am releasing, discharging and waiving claims or actions that I may have presently or in the future for all acts or omissions of the City, its officials, officers, directors, employees, advisors, agents, representatives, patrons, and volunteers, to the extent allowed by law.**

D. Venue

The venue for any dispute arising out of this instrument shall be Hays County, Texas.

I have read this Release and Waiver and by signing it agree with its terms. It is my intention to exempt and relieve the City of Buda from any and all liability related to my participation as a city volunteer.

Participant:

Printed Name	Signature	Age	Date

If participant is under 18 years of age, Parent or Guardian must read the above and complete the following:

I have read this Release and Waiver and by signing it agree with its terms as it applies to my child. It is my intention to exempt and relieve the City of Buda from any and all liability related to my child's participation as a city volunteer.

Parent / Guardian:

Printed Name	Signature	Age	Date