



SIMI VALLEY LIBRARY TAG MEMBER APPLICATION

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PLEASE PRINT CLEARLY or TYPE. To be completed by applicant.

Return this application via email or drop off at the Library at the Customer Service Desk.

Last Name _____ First Name _____

Home Phone_(_____) _____ Cell Phone_(_____) _____

Home Address _____ male _____ female _____

City _____ State _____ Zip code _____ Birthdate (month/day/year) _____
Min. age: going into 7th grade. Max. age: going into 12th grade.

School attending _____ Email _____

Parent email address _____

First and Last name of emergency contact _____

Phone of contact_(_____) _____ relationship to volunteer _____

All the above information is confidential and is for library use only.

Teen Advisory Group works closely with the Teen Services Librarian to improve library offerings to teens. This includes developing new library programs, choosing new books, creating displays, decorating, and reviewing books for peers. Members will have direct influence on the library’s materials and services for teens.

Volunteers receive community service credit. In addition, volunteers learn valuable job skills such as: how to follow directions, how to organize files and other materials, event planning, and develop enhanced writing skills. You will also make new friends, have the opportunity to volunteer with current friends, and attend many library programs and events. This is a fun and interesting way to give your Library some support!

Do you have any special skills or interests that will help you as a TAG member?

Why do you want to join TAG?

What is your Favorite Book?

What would you like to see in the Teen section or what program would you like the Library to host?

REQUIREMENTS: Attend monthly meetings to be held on the first Monday of the month from February until December. Members with 3 unexcused absences will need to reapply. Must attend at least five Teen programs throughout their time on the committee.

Are you able to commit to monthly committee meetings during this time period? YES___ NO___

Are you able to commit to attend at least 5 teen programs? YES___ NO___

City of Simi Valley Volunteer Agreement

I, _____ (please print), desire to volunteer and perform miscellaneous assigned duties for the City of Simi Valley ("City"), without compensation, beginning _____ (enter date). In consideration for permitting me to participate as a volunteer, I hereby agree that:

- A. **Volunteer Status:** I am a volunteer and am not an employee of the City. As a result, I am not entitled to any form of compensation or employment benefits including, but not limited to, wages, salary, health insurance, or retirement benefits. I understand and acknowledge that the City can terminate my status as a volunteer for the City at any time and for any reason, and there is no promise of future employment.
- B. **Confidentiality:** In the course of my service I may learn of, be told, or be asked to relay information of a private, confidential, or privileged nature. Furthermore, I may have access to confidential computer databases and files. I shall not reproduce and/or disclose private, confidential, or privileged information without express direction from, or the authorization of, a City supervisor.
- C. **Assignments:** I acknowledge that appropriate instructions have been given to me regarding this volunteer assignment and I agree to observe all safety rules and use care in the performance of my assignments. I will perform assigned tasks that are within my physical capability to the best of my ability and will not undertake tasks that are beyond my abilities. I will immediately inform my supervisor of any limitations I may have with my assignments. I am familiar with the safe operation and use of equipment and tools for this volunteer assignment and will not use those with which I am unfamiliar or do not know how to operate safely.
- D. **Release of Liability, Covenant Not to Sue, and Express Assumption of Risk:** I hereby release the City of Simi Valley, its employees, its officers and other employees of all liability, covenant not to sue any or all of the foregoing and expressly assume the risk for my death, disability, or other personal injury to myself, damage to my property, loss or expense suffered by me caused by the City of Simi Valley, its officers, and other employees while participating in this volunteer assignment.
- I further agree to defend, indemnify, and hold harmless the City of Simi Valley, its officials, officers, employees, representative, and agents, from and against all claims, lawsuits, liabilities or damages of whatsoever nature arising from my participation in this volunteer assignment. This Release of Liability and Express Assumption of Risk is binding upon my heirs, legatees, and devisees.
- E. **Loss, Theft and Damage:** I shall assume all risk of loss, theft, or damage to any of my personal property, equipment, or supplies arising from or connected with services I perform for the City. I shall reimburse the City for any loss, theft, or damage to any of the City's property, equipment, or supplies arising from or connected with services I perform for the City.

I HAVE CAREFULLY READ THIS VOLUNTEER AGREEMENT AND FULLY UNDERSTAND ITS CONTENT AND MEANING. I AM AWARE THAT THIS FORM IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN ME AND THE CITY OF SIMI VALLEY.

Date: _____ (Signature of Participant)

If Volunteer is under 18 years of age: _____ parent/guardian signature

_____ print name of parent/guardian