

**Burk's Falls, Armour & Ryerson Union Public Library  
Volunteer Application**

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

Name: \_\_\_\_\_

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

Phone: (home): \_\_\_\_\_ (cell): \_\_\_\_\_

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

**Emergency Contact**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone (home): \_\_\_\_\_ (cell): \_\_\_\_\_

**Skills & Experience**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Why are you interested in volunteering with the Burk's Falls, Armour & Ryerson Union Public Library Board?**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date