

Cook Memorial Library
Volunteer Home Delivery Driver Application Form (June 1, 2020)

Name _____ Date of Birth (must be over 18) _____

Address _____

Phone(s) _____ Email _____

Contact in case of emergency

Name _____ Relationship _____

Emergency contact phone _____

Driver's License

Number _____ State _____ Expiration _____

Auto Insurance

Insurance Company _____ Phone _____

Bodily Injury Limit _____ Property Damage Limit _____

Vehicle make and model _____

Volunteer agreement:

I hereby attest that my attendance and involvement in activities undertaken for Cook Memorial Library are voluntary and that I am not entitled to compensation for any services I provide. In addition, I agree to keep confidential all patron information, and all information in library records I may encounter.

If I qualify for volunteer service I agree to abide by the regulations and policies of Cook Memorial Library.

I have read and understand the Volunteer Policy of Cook Memorial Library.

Signed _____ Date _____

Per our Volunteer Policy: All volunteers over the age of 18 will be required to have a criminal background check at a cost of \$25.00 to be paid by the library. Volunteers may begin service while the background check is in process, but may not have unsupervised time with children or elders in that period.