

Two Harbors Public Library

Youth Volunteer Application

Thank you for being willing to help the Library! Date_____ Address____ Phone______ Age_____ E-mail (optional)_____ Why would you like to volunteer at the library? What other paid or volunteer work have you done, or what chores do you do at home? _____ What days and times would work for you? _____ Signature_____ Name of Parent (print)______ Signature of Parent_____ For Staff to fill in - Plan for starting: