



JDCPL Volunteer Parental/Guardian Consent Form
(For Volunteers Under the Age of 18)

Volunteer Information:

- Volunteer's Name: _____
- Date of Birth: //_____

Parent/Guardian Information:

- Name: _____
- Relationship to Volunteer: _____
- Phone Number: _____
- Email: _____

Consent Statement: I, _____ (parent/guardian name), give my permission for my child, _____ (volunteer's name), to participate as a volunteer at the Jasper-Dubois County Public Library. I understand that my child will be expected to follow all library policies and procedures. I also authorize the library to contact me in case of emergency.

Signature & Date:

- Parent/Guardian Signature: _____
- Date: //_____

Emergency Contact (if different from above):

- Name: _____
- Phone Number: _____