

**Montgomery-Floyd Regional Library  
Teen Volunteer Application**

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

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

**City:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Age:** \_\_\_\_\_ **Volunteers must be at least 11 to participate.**

**Email** \_\_\_\_\_

**Name of parent/guardian:**  
\_\_\_\_\_

**Telephone number (Home):** \_\_\_\_\_ **(Work):** \_\_\_\_\_

**PARENT/GUARDIAN APPROVAL:**

\_\_\_\_\_ has my permission to  
apply as a Teen Volunteer for the Montgomery-Floyd Regional Library.

**Please the Branch you prefer:**

Blacksburg  Christiansburg  Floyd  Meadowbrook

**When are you interested in volunteering? (Check all that apply)**

Weekdays  M  T  W  Th  F

Weekends  Saturday  Sunday

Summer

**References:** \_\_\_\_\_  
\_\_\_\_\_

**Parent/Guardian Signature:** \_\_\_\_\_

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

**Please return to:**

**Sarah Pahl, Youth Services Manager**

[spahl@mfrl.org](mailto:spahl@mfrl.org)

**540-382-6965 ext. x 110**

