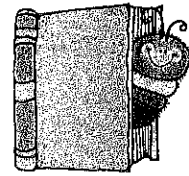


Library Volunteers



If you are interested in volunteering in the library, I would love to have your help! Please fill out this form with the days and times you are available.

Volunteer Name _____

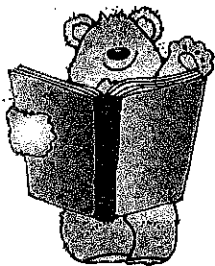
Phone # _____

Email Address _____

Student Name _____

Please check the days and times you are available to help.

	M	T	W	Th	F
9:00-11:30	___	___	___	___	___
1:00-3:00	___	___	___	___	___



Thank you for volunteering your time!

Mrs. Buiting