



FRIENDS OF THE PALM SPRINGS LIBRARY

VOLUNTEER APPLICATION FORM
Friends of the Palm Springs Library
300 S. Sunrise Way
Palm Springs, CA 92262
(760) 668-8838

LAST NAME _____ FIRST NAME _____

STREET ADDRESS: _____

CITY/STATE/ZIP _____

PHONE (H) _____ (C) _____ (email) _____

EMERGENCY CONTACT PHONE: _____ NAME: _____

Days and Time Available _____

Jobs interest in (Please check 1st, 2nd, and 3rd choices):

- _____ Book Sorting and Sales
- _____ Fundraising Committee
- _____ Membership Committee
- _____ Newsletter Committee
- _____ Special Event/Program Aide

SPECIAL QUALIFICATIONS:

(Computer experience? Tutoring?) _____

SPECIAL WORK NEEDS (Health, Lifting, Standing, etc.): _____

www.friendsofthepalmspringslibrary.org

volunteer@friendsofthepalmspringslibrary.org