

Friends of the Castro Valley Library

Volunteer Application

Last Name: _____ First Name: _____

Nickname (optional): _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____

Email: _____

I would be interested in helping the Friends by working with other volunteers on:

- Bookstore
- Sales Event
- Newsletter
- Library Advocacy
- Fund Raising
- Online Sales
- IT Projects
- Other Volunteer Interests: _____

More about you:

Do you have any special skills, professional experience or training that you would like us to know about you?

Please list any significant volunteer experience you have had during the past three years.

When are you available to volunteer (hours, days of the week, months, etc.)?