

## Teen Volunteer Permission Form

Name of volunteer: \_\_\_\_\_

Name(s) of parent(s)/guardian(s):

\_\_\_\_\_  
\_\_\_\_\_

Parental/Guardian consent:

I \_\_\_\_\_ give permission for my child  
\_\_\_\_\_ to volunteer at the Swampscott Public  
Library. I agree to be responsible for providing my child with transportation  
to and from the library so that they can fulfill their volunteer commitments  
and responsibilities. I agree that it is my responsibility to inform the YA  
Librarian and Library Director if I no longer give my permission for my child  
to volunteer at the library. I confirm that both I and my child have read the  
library's Volunteer Guidelines.

\_\_\_\_\_  
Parent/guardian signature

\_\_\_\_\_  
Date