

Volunteer Interest Form  
Cranford Public Library

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

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

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Are you willing to help on Saturdays? Y / N

Circle the days of the week you are available.

Monday    Tuesday    Wednesday    Thursday    Friday Saturday

What sort of help would you like to provide?

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Miscellaneous Notes:

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