

Metuchen Public Library
Teen Advisory Board Application
2019-2020 (Grades 6-12)

Please print clearly!

Name:	
Address:	
Phone Number:	
Email Address:	
School:	
Grade:	
Parent's name and phone number:	

Please give an email address that is read at least weekly. All correspondence is through email.

Requirements and responsibilities of being a member of the TAB:

_____ I am a Metuchen resident in grades 6-12.

_____ I will attend meetings on a fairly regular basis. Meetings will be held mostly on Thursdays during the school year from 7:30-8:30.

_____ I will support the TAB by attending Young Adult sponsored programs and participating in Metuchen Library activities like the **Country Fair, the annual book sale, Lunar New Year and the Memorial Day Parade.**

I, _____, understand the responsibilities of the Teen Advisory Board and that the members are asked to give at least **15 hours of commitment hours** per calendar year to the Metuchen Library. These hours are accrued by attending meetings and programs and by participating in other TAB activities. They can also be acquired by volunteering to do things at the Metuchen Library.

Signature: _____

Parent's signature: _____

If you, as the parent, also want to be on the email list, please provide me your email address.

Please return this form to Ms. Whittington at the Metuchen Public Library; 480 Middlesex Avenue; Metuchen, New Jersey 08840 by mail or dropping it off at the circulation desk. You may also scan the document and send it by email to MWhittington@lmxac.org.