

# Cary Family YMCA Leaders Club Application

*This is for **ALL members** (new AND returning)*

*Application due to Liz Simperts (high school) or Hannah Wait (middle school)*

Full name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_

Your email \_\_\_\_\_ Parents email \_\_\_\_\_

Phone \_\_\_\_\_ Current Age \_\_\_\_\_ Grade in fall 2011 \_\_\_\_\_ School \_\_\_\_\_ Tshirt Size \_\_\_\_\_

List any previous leadership experiences (when and where) \_\_\_\_\_

\_\_\_\_\_

If you have had previous experience with the YMCA please list below

\_\_\_\_\_

\_\_\_\_\_

Please check the areas of service in which you would be interested in volunteering.

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Nursery (hours vary) | <input type="checkbox"/> YMCA tutorial programs | <input type="checkbox"/> Swim Lessons                          |
| <input type="checkbox"/> After Schools        | <input type="checkbox"/> SOS days               | <input type="checkbox"/> Y-Life (after school afternoons)      |
| <input type="checkbox"/> Youth basketball     | <input type="checkbox"/> Program registrations  | <input type="checkbox"/> Administrative Duties                 |
| <input type="checkbox"/> Referee              | <input type="checkbox"/> Filing                 | <input type="checkbox"/> Scorekeeping                          |
| <input type="checkbox"/> Copying              | <input type="checkbox"/> Time clock             | <input type="checkbox"/> Service Weekends at Sea Gull/Seafarer |

**Please answer the following questions to the best of your ability.**

1. Why do you want to be in Leaders Club? \_\_\_\_\_

\_\_\_\_\_

2. What personal qualities do you possess that would enable you to be an effective leader? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

3. What do you feel is your responsibility as a Leaders Club member? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

# References

List one adult who knows you well and can tell us something about you (i.e. relatives, close friends, etc.)

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Relationship to you \_\_\_\_\_

List two adults, not related to you, who know your abilities (i.e. teacher, coach, minister, youth group leader, etc.)

1. Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Occupation \_\_\_\_\_

2. Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Occupation \_\_\_\_\_

List any present or former YMCA staff or Leaders Club members you may know \_\_\_\_\_

Applicant's waiver of rights of access to confidential statement:

For purpose of encouraging candor, I hereby freely and voluntarily waive any rights I might have to access to any information contained on the YMCA's recommendation form and agree that the statement shall remain confidential.

Leaders Club member Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Relationship to Leaders Club applicant \_\_\_\_\_

# CARY FAMILY YMCA LEADERS CLUB CONTRACT

(to be read and signed by student AND parent)

- In serving as a Leaders Club Member, I agree to perform my responsibilities to the very best of my abilities, with cheerfulness and respect, under the direction and the guidance of the club advisors.
- I realize that safety is my first priority when working as a YMCA volunteer. I will constantly strive to be aware of possible hazards and remain educated about safety procedures.
- I understand that I am a vital member of this club and am expected to attend all weekly club meeting. I also understand that a maximum of two meetings per semester are excused. Further absences may jeopardize my club membership.
- I understand that I must be up to date on all my volunteer service hours and maintain a 3.0 GPA in order to attend outings and trips with the club. I understand that 100 volunteer hours per year is the requirement.
- I realize that my personal appearance and behavior is important in setting a good example as a leader. Therefore, I will strive to keep my physical appearance clean and neat and my behavior toward my peers, advisors, and others will be a worthy example to follow.
- I promise to put the needs and feelings of others before my own.
- If I have a problem with another person, I will confront them first in a mature manner. If the problem persists, I will inform the Leaders Club Director or Supervisor for further action.
- I understand that I will refrain from the use of tobacco products, alcohol, and illegal drugs.
- I will be respectful and responsible in my use of social media, including but not limited to: Facebook, Twitter, Formspring, and texting.

By affixing my signature below, I give my word that I will put forth my best in adhering to the goals and mission of the YMCA and will abide by the terms outlined in the contract.

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Leaders Club Member

As a parent/guardian, I have read the above Leaders Club contract and understand what is expected of my teen this year.

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Parent/Guardian

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Date