



FOR YOUTH DEVELOPMENT  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY

# Volunteer Application

Please place an X on the areas you are interested in volunteering.

- |  |                    |               |          |
|--|--------------------|---------------|----------|
| Administration/ Clerical                   | Special Events     | Maintenance   | Greeters |
| Aquatics                                   | Caring Network     | Wellness      | Nursery  |
| Youth Programs                             | Youth/Adult Sports | Tutor/ Mentor | Teens    |
| WeBuildPeople- Annual Fundraising Campaign |                    |               |          |

Name \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Are you over 16? \_\_\_\_\_ If under 16, current age: \_\_\_\_\_ Have you ever volunteered at the Y before? \_\_\_\_\_

**Days available to volunteer:**

Day(s) of the week	Time(s)	Day(s) of the week	Time(s)
Sunday	_____	Thursday	_____
Monday	_____	Friday	_____
Tuesday	_____	Saturday	_____
Wednesday	_____		

Have you ever been convicted of a felony? Yes No  
Have you had any criminal convictions for child abuse or sex-related crimes? Yes No

Why are you interested in volunteering with the YMCA? \_\_\_\_\_  
\_\_\_\_\_

List the name, phone and email address of two (2) business/personal references that are not related to you UNLESS the position requires working with children, then one reference must be an immediate family member.

**Business/Personal**

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

Email \_\_\_\_\_

How do you know this person? \_\_\_\_\_

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

Email \_\_\_\_\_

How do you know this person? \_\_\_\_\_

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

Email \_\_\_\_\_

How do you know this person? \_\_\_\_\_

Signature of applicant \_\_\_\_\_ Date \_\_\_\_\_

Signature of parent (if applicant is under 18) \_\_\_\_\_ Date \_\_\_\_\_