



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

For YMCA use:
Site/Dept: _____ Supervisor: _____
Start Date: _____ End Date: _____
Hrs/Week: _____

VOLUNTEER APPLICATION

Name: _____ Date: _____ Phone: _____
Address: _____
City: _____ State: _____ Zip: _____
Email: _____

Please check which description fits your current status:
__ Employed Full-time __ Employed Part-time __ Student Full-time __ Student Part-time __
__ Retired __ Stay-at-home Parent __ Other: _____
Why would you like to volunteer for the YMCA?: _____

What do you hope to gain from volunteering? _____

What days are you available to volunteer? _____
What times are you available? _____
What areas of the YMCA would you like to volunteer? (check all that apply)
__ School-Age Programs/Camp __ Administration __ Coaching
__ Special Events __ Teens __ Fundraising
Are you currently certified in any of the following: (if so, please list expiration date)
CPR _____ CPR-PR _____ First Aid _____ Lifeguard _____ AED _____ Ocy Admin _____ WSI _____
Are you interested in volunteering: __ One-Time __ Set number of hours (____) __ On-going

References: (please list 3 - do not include family members or classmates)
Name: _____ Phone number: _____
Relationship: _____ Years known: _____
Name: _____ Phone number: _____
Relationship: _____ Years known: _____
Name: _____ Phone number: _____
Relationship: _____ Years known: _____
Background Check:
Have you ever been convicted of any child abuse offense? **Yes** or **No**
Have you ever been convicted of a criminal charge? **Yes** or **No** If yes, please explain: _____

I hereby affirm that my answers to the previous questions are true and correct and that I have not knowingly withheld any fact or circumstance that would affect my application unfavorably. I understand that any false information may result in my discharge. I hereby give my permission for the YMCA to obtain information related to my criminal history record. I understand that this information will be used to determine my eligibility for a volunteer position with the Gallatin Valley YMCA. I also understand that as long as I remain a volunteer here, they may repeat this criminal history record check at any time. I also consent to the use of any photographs which may be taken to be used by the YMCA in any marketing materials.

Signature: _____ Date: _____