

VOLUNTEER FORM

APPLICATION FOR VOLUNTEER SERVICE AT THE SAN ANGELO YMCA

Thank you for considering the San Angelo YMCA as a place to volunteer your time and talents. Volunteers are vital to the YMCA. You will find questions on this form about your background, former residences and places of employment. The YMCA makes an active effort to prevent abuse. So even though we may know you well, all volunteers are subject to criminal history and background checks. It's just one of the many ways we help protect children and other vulnerable people served by the YMCA. Thank you for your cooperation and your interest in the San Angelo YMCA. If you have any questions about any part of our application process, please contact us at (325) 655–9106.

WHAT SPORT/EVENT ARE YOU	VOLUNTEERING FOR?			
Today's Date:				
Full Legal Name:				
D.O.B:	Email Address:			
Mailing Address:				
Physical Address (if mailing is a	a P.O. Box):			
City:	State: _	Zip:		
Phone Day:	Evening:			
Are you over the age of 18?	Yes	No		
Do you want to coach your chil	d in a sport?	Yes No		
Your child's name:				
Grade:	School:			
Position in which you are volun	nteering for: (Head Coad	ch, Assistant, etc.)		
If already an established team,	, what is the team name	?		
EMPLOYMENT				
Current Employer:		How Long:		
Address:		Phone:		

Supervisor Name:			
BACKGROUND			
Please list here any other na	ames you may have uso	ed in the past:	
Driver's License #:	State:	SS#:	
Have you ever been convicto	ed or accused of a crim	ninal offense? If so,	please explain?
(Note: Not all offences prev	ent your service to the	YMCA. Omission o	f offences does.)
Emergency Contact:			
Name:			_
Address:			_
City:	State:	Zip:	·
Phone: Day:	Evening:		
References:			
Please list one person other	than relatives and em	ployers whom you	have known for at least
two years and who know yo	u well enough to provi	de us with a referer	ice.
1. Name:			
Telephone:			
How long have you known th	nis reference?		
In the San Angelo YMCA's efforts to attra for volunteer service with the YMCA, an e I fully consent to and authorize all such in or omission of fact would exclude my bein	extensive inquiry will be made con nquires. I understand that all inqu	cerning my prior employmen iries will be confidential. I un	t, activities, character and health, and
Signature:			_ Date:
Parent or guardian's signat			
YMCA MISSON STATEMENT: The mission of the San Angelo YMCA is to and youth, to permit them to achieve their community.	serve the people in the San Angel	o community of all faiths and	l ages, with an emphasis on families
STAFF USE ONLY Approved Not App	proved Re	ason	
Staff Signature	Date:		