



FOR YOUTH DEVELOPMENT  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY

# 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 P.O. Box): \_\_\_\_\_

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

Phone Day: \_\_\_\_\_ Evening: \_\_\_\_\_

Are you over the age of 18?                      Yes                      No

Do you want to coach your child in a sport?                      Yes                      No

Your child's name: \_\_\_\_\_

Grade: \_\_\_\_\_ School: \_\_\_\_\_

Position in which you are volunteering for: (Head Coach, 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 names you may have used in the past:

\_\_\_\_\_

Driver's License #: \_\_\_\_\_ State: \_\_\_\_\_ SS#: \_\_\_\_\_

Have you ever been convicted or accused of a criminal offense? If so, please explain?

\_\_\_\_\_

\_\_\_\_\_

(Note: Not all offences prevent your service to the YMCA. Omission of offences does.)

**Emergency Contact:**

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

Address: \_\_\_\_\_

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

Phone: Day: \_\_\_\_\_ Evening: \_\_\_\_\_

**References:**

Please list one person other than relatives and employers whom you have known for at least two years and who know you well enough to provide us with a reference.

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

Telephone: \_\_\_\_\_ Relationship to you: \_\_\_\_\_

How long have you known this reference? \_\_\_\_\_

*In the San Angelo YMCA's efforts to attract the highest quality volunteer staff, I have been advised that, as a part of the application process for volunteer service with the YMCA, an extensive inquiry will be made concerning my prior employment, activities, character and health, and I fully consent to and authorize all such inquiries. I understand that all inquiries will be confidential. I understand that any misrepresentations or omission of fact would exclude my being considered for volunteer services or, after May service begins, may cause termination.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent or guardian's signature (if under 18): \_\_\_\_\_

**YMCA MISSION STATEMENT:**

The mission of the San Angelo YMCA is to serve the people in the San Angelo community of all faiths and ages, with an emphasis on families and youth, to permit them to achieve their God-given potential in spirit, mind and body through its programs, staff, facilities and the community.

**STAFF USE ONLY**

Approved \_\_\_\_\_ Not Approved \_\_\_\_\_ Reason \_\_\_\_\_

Staff Signature \_\_\_\_\_ Date: \_\_\_\_\_