



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

Volunteer Application

Southern Boone Area YMCA

First Name _____ Last Name _____

Date of Birth _____ Email _____

Address _____

City _____ State _____ Zip _____

Cell Phone (____) _____ Drivers License # _____

Work Phone (____) _____

What is the best time to contact you? _____

Have you ever been convicted of a crime?

If "Yes" please explain: Yes No

NOTE: The existence of a criminal record will not constitute an automatic ban to volunteering.

Are you a registered sex offender?

Community service requirement? Yes No Number of hours needed _____ Deadline ___/___/____
 Yes No

Are you a YMCA member? Yes No

Are you a YMCA donor? Yes No

Do you have any children involved in YMCA programs? Yes No

If "Yes" which program? _____

Are you over 18? Yes No

Please check which description(s) fits your current status

- Employed full-time Student full-time
 Employed part-time Student part-time
 Retired stay at home parent Other _____