



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

Ashtabula County YMCA Volunteer Application

Thank you for considering the Ashtabula County YMCA as a place to donate your time and talents. Volunteers are vital to the YMCA. Without them, we wouldn't be able to meet the needs of the kids, families, and adults who live in Ashtabula.

At the Ashtabula County YMCA, we know that your time and talent are precious, and we want every minute you spend with us to be worthwhile. That's why we're asking you to take a few minutes to fill out this application. It will help us begin to make the right match between your skills and interests and the opportunities available.

You will find questions on this form about your background, residence, and so on. We hope you'll understand that, unfortunately, there are a few people who apply for volunteer jobs at the YMCA for the wrong reasons. The YMCA, however, makes an active effort to prevent abuse. So even though we may know you well, we reserve the right to conduct background and reference checks on all volunteers. It's just one of the many ways we help protect children and other vulnerable people served by the YMCA.

Thanks for your cooperation in this effort and your interest in the YMCA. If you have any questions about this or any part of our application process, please feel free to contact us.

Name _____
(Last) (First) (Middle)

Address _____

City _____ State _____ Zip _____

Phone: Day _____ Evening _____

How long have you been at this address? _____

Are you 18 years of age or over?

Yes No (If no, please have your parent or guardian sign the application, too.)

Emergency Contact

Name _____
(Last) (First) (Middle)

Address _____

City _____ State _____ Zip _____

Phone: Day _____ Evening _____

Please list the names of relatives, friends, or acquaintances employed by the YMCA and their relationship to you.

INTERESTS

How did you learn about volunteer opportunities at the YMCA? _____

Why would you like to volunteer? _____

Have you heard about any particular volunteer opportunities that interest you? _____

Would you like to talk to someone further about what kinds of volunteer opportunities might match your skills, talents, and interests? _____

Are there any particular skills, talents, or interests you'd like to share? _____

What other organizations have you volunteered for, if any? _____

I/we understand that there is a risk of serious injury associated with the use of the YMCA facilities, participation in YMCA programs and use of exercise and other equipment. As a condition of my participation I agree to assume the risk of injury arising from my use of the facilities, programs, equipment and for all other matters at all YMCA locations or programs whenever occurring. On behalf of myself and my heirs, administrators and executors, I hereby release and hold the YMCA and its officers, trustees, employees, agents and contractors harmless from all such claims for injury and damage. I understand that I would not be permitted to participate in any YMCA program or use any YMCA facility or equipment without signing this agreement. I/we authorize the Ashtabula County YMCA or its designees, agencies and contractors to create, have and use photographs, slides and videotapes containing my image for its record keeping or marketing/public relations programs. I understand that the Ashtabula County YMCA is not responsible for personal property lost, damaged, or stolen while members and/or program participants are using YMCA facilities, on YMCA premises, or involved in YMCA programs.

Your signature _____

Date _____

Parent's or guardian's signature _____
(if you're under 18)

Date _____