



# VOLUNTEER APPLICATION

## MARINETTE-MENOMINEE YMCA

**Please indicate your areas of interest:**

- |  |   |
|--|---|
| <ul style="list-style-type: none"> <li><input type="radio"/> Administration/Clerical/Membership</li> <li><input type="radio"/> Adult Sports</li> <li><input type="radio"/> Aquatics</li> <li><input type="radio"/> Maintenance/Housekeeping</li> <li><input type="radio"/> Mentor</li> <li><input type="radio"/> Policies (property, Finance, Child Safety)</li> <li><input type="radio"/> Special Events</li> </ul> | <ul style="list-style-type: none"> <li><input type="radio"/> Teens</li> <li><input type="radio"/> Totwatch</li> <li><input type="radio"/> Y Garden</li> <li><input type="radio"/> Youth Programs</li> <li><input type="radio"/> Youth Sports</li> <li><input type="radio"/> Wellness/Fitness</li> </ul> |
|--|---|

**Name:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **City, State, Zip:** \_\_\_\_\_

**Email:** \_\_\_\_\_ **Phone Number:** \_\_\_\_\_

Have you volunteered at the YMCA in the past? \_\_\_yes \_\_\_no  
 Have you ever been convicted of a felony? \_\_\_yes \_\_\_no  
 Have you had any criminal convictions for child abuse or sex-related crimes? \_\_\_yes \_\_\_no

**Why are you interested in volunteering with the YMCA?**

\_\_\_\_\_

Are you required to volunteer? \_\_\_yes \_\_\_no If yes, how many hours are needed? \_\_\_ Deadline: \_\_\_\_\_

Name of school/agency/government body requiring community service: \_\_\_\_\_

**Please indicate the days and times you are available to volunteer:**

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

**REFERENCES:** List three references that you authorize us to contact. References may include supervisors, co-workers, faith leaders, teachers or school counselors. One reference must be a family member or guardian.

Type	Name	Contact Information	Years Known
Family Member		Email: Phone:	
Personal or Professional		Email: Phone:	
Personal or Professional		Email: Phone:	

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Parent Signature (if applicant is under 18): \_\_\_\_\_ Date: \_\_\_\_\_