



Penobscot Bay YMCA
VOLUNTEER APPLICATION

Thank you for your interest in volunteering at the PENOBSCOT BAY YMCA.
Please take a moment to complete the following information.

Personal Information

Name _____

Address _____ City _____ Zip _____

Home Phone _____ Work Phone _____

Are you at least 18 years of age? ____ (If no, please have your parent or guardian sign the application)

Have you ever been convicted of a felony? (If yes, please explain) _____

Program that you prefer to volunteer _____

Emergency Contact

Name _____

Address _____ City _____ Zip _____

Home Phone _____ Work Phone _____

References

Name _____ Phone _____ Relationship _____

Name _____ Phone _____ Relationship _____

Name _____ Phone _____ Relationship _____

Child Abuse Prevention Notice

Allegations or suspicions of child abuse are taken very seriously at the YMCA and will be reported to the proper authorities for investigation. We screen carefully to prevent abusers from being volunteers and provide child abuse prevention training to staff. Initial _____

Application Acknowledge

The facts set forth in this application are true and complete. I understand that my volunteer services would be 'at will' giving either me or the YMCA the right to terminate my services at any time without liability of obligation. I further understand that as a volunteer, I am required to abide by all established policies and procedures of the YMCA.

Signature of Applicant

Date

Parent or Guardian Signature (if applicant under age 18)

Date