



We build strong kids. strong families,
strong communities.

Portage Township YMCA Volunteer Application

(Updated: 1/2009)

Basic Information

Name: _____ Date: _____

Address: _____ City, State ZIP _____

Home or Cell Phone: _____ Work Phone: _____

E-mail Address: _____

Employer: _____ School: _____

Ideal Volunteer Opportunity

For what type of volunteer work are you applying?

What skills/interests would you like to share?

When are you available to serve as a volunteer?



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References/Background Check

Birth Date: ____/____/____ Sex: _____

Driver's License/State ID Number (please circle): _____

Work Reference: _____ Phone #: _____

Company: _____ Relationship at work: _____

Time acquainted with this person: _____

Personal Reference: _____ Phone #: _____

Relationship: _____ Time acquainted with this person: _____

Emergency Contact: _____ Phone #: _____

Relationship: _____

Volunteer Policy & Procedures Guide

How did you learn about volunteering at the YMCA? _____

Your signature below indicates:

- 1.) That you have received a copy of the Volunteer Policy & Procedures Guide along with your application.
- 2.) That you have agreed to read and follow the policies and procedures outlined in said document.
- 3.) That all information you have supplied on this application is true to the fullest extent of your knowledge.
- 4.) That you give your permission for the Portage Township YMCA to run a full background check on you based on the information you provided on this application.
- 5.) That you give your consent to submit to a drug test if called upon to do so by the Portage Township YMCA.

Volunteer's Signature: _____