



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

Volunteer Application

Personal Information

Name _____
(Last) (First) (Middle)

Address _____

City _____ State _____ Zip _____

Phone: Day _____ Evening _____

Email: _____

How long have you been at this address?

Emergency Contact

Name _____
(Last) (First) (Middle)

Address _____

City _____ State _____ Zip _____

Phone: Day _____ Evening _____

Required information for Criminal Background Check

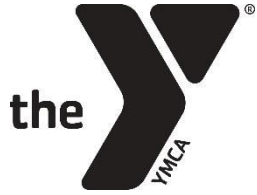
Date of Birth: _____

Drivers License # _____ Alternate Photo ID _____

SSN: _____

Have you ever been convicted of a criminal offense? Yes No If so, please explain:

Golden State YMCA
YMCA Camp Sequoia Lake
320 N. Akers Street, Visalia, CA 93921
P 559 624 1110. www.ymcacampsequoialake.org



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References

1. Please list your last employer:

Name of organization _____

Employed from when to when? _____ (include month and year)

Address _____

City _____ State _____ Zip _____

Phone _____

State job title and describe your work _____

Name and title of immediate supervisor _____

Have you ever volunteered for other organizations? ___Yes ___No If Yes, please list below:

2. Volunteer History:

Name of Organization: _____ Volunteer Position:

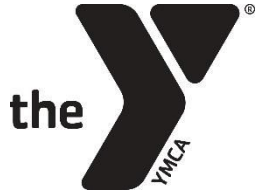
Supervisor Name: _____ Phone Number: _____

Name of Organization: _____ Volunteer Position:

Supervisor Name: _____ Phone Number: _____

Your signature _____ Date _____

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Volunteer Information

1. Which site (youth, skate, family) would you like to volunteer at: _____

Dates of availability: _____ through _____

2. Please list your skills and services that you hope to provide to camp:

3. Why do you want to volunteer at YMCA Camp Sequoia Lake?



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Volunteer Acknowledgment

Background Screen: I understand the Golden State YMCA makes every effort to prevent child abuse and thus requires that all volunteers to provide information for a criminal background check two weeks prior to service.

Supervision: I agree to follow the supervision and direction of any supervisor or manager to whom I have been assigned to perform services, and to participate in any training required in order to perform the voluntary services.

Training: I understand that I am required to complete the Golden State YMCA training prior to my volunteer service. The training includes Child Abuse Prevention, Emergency Procedures, Reporting procedures and the Code of Conduct.

Non-Employee: I agree that I am not considered to be an employee of YMCA or any of its affiliates or subsidiaries for any purpose, unless expressly required by law, while performing the above-described voluntary services.

Liability for Injuries and Damages: I understand that if I am responsible for injuries to third parties or damages to their property while acting outside the scope of assigned volunteer duties, that I may be held personally liable for any monetary damages a court may award to the injured party.

Limited Liability Coverage and No Employment Benefits: I understand YMCA provides limited accidental liability coverage to volunteers, and I am not eligible for workers' compensation benefits; no other employee medical, retirement, or insurance plans apply to my volunteer service.

YMCA Policies: I understand and acknowledge that I must abide by the YMCA's Code of Conduct and understand that copies of these policies are located in both the Visalia and Lake office, and further agree to familiarize myself with them.

Agreement to Follow Rules: I understand and acknowledge that I must abide by all other applicable rules regarding conduct, confidentiality, safety, and welfare.

Record keeping: I understand and agree to accurately record and report my volunteer service hours as requested by my assigned supervisor.

At-Will Service: Finally, I understand YMCA or I may end my volunteer services at any time.

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I understand that completion of this form does not guarantee me status as a volunteer. I must meet all stated conditions required of the position for which I am asking to be considered.

I understand that information concerning my past record may be sought from employers, references and organizations I may have volunteered for and I hereby release from all liability or damage those individuals, organizations, or corporations who provide such information.

ACKNOWLEDGEMENT

I hereby certify that the information provided on this application is accurate to the best of my knowledge and subject to verification by the YMCA. I authorize the individuals or organizations named in this application to provide the YMCA (its authorized employees, agents, or representatives) with any relevant information that may be required to arrive at a volunteer placement decision and hereby release any such individuals or organizations from any and all liability which they might otherwise incur as a result. I understand that any misrepresentation or omission of material fact on this application may be justified as for refusal for placement. I have read the above acknowledgements and this statement and accept the same as a condition of my placement with the YMCA. I, the undersigned, do hereby authorize the Golden State YMCA to take photographs, videos, motion pictures and/or sound recordings of me. I further grant the Golden State YMCA permission to use the photographs, videos, motion pictures and/or sound recordings in its general publicity and campaign materials.

Signature of Applicant

Date