



Volunteer Application

Thank you for considering the 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 in our community.

At the 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.

APPLICANT INFORMATION (Select One)

- I am a current YMCA Member (circle one type) Youth Adult Family
- I am not a member, but have participated in other Lake County YMCA Programs
- I am not a member and have not participated in any YMCA programs

First Name _____ Last Name _____ Gender _____

Date of Birth _____ Home Address Line 1 _____

Home Address Line 2 _____

City _____ St _____ Zip _____

Home Phone (_____) _____ Cell/Other (_____) _____

Email _____

Current Occupation _____ Employer _____

Interests & Opportunities *Select all that apply*

- | | |
|--|--|
| <input type="checkbox"/> I would like to volunteer on a regular basis in the following areas:
____ Camp Neehi/CMO
____ Child Watch
____ Saturday Morning Mania
____ Gymnastics Teacher
____ Sports Instructor
____ KOOL Kids
____ Instructor-Pool
____ Class Assistant-Pool
____ Deck Assistant-Pool
____ Arts Instructor
____ Healthy Lifestyle Center Greeter | <input type="checkbox"/> I would like to help with special events, seasonal programs or projects a couple times each year.
____ Family Nights
____ YMCA Dream House
____ Healthy Kids Day
____ Summer Camp
____ Golf Outing |
|--|--|

**Special/Professional Skills* From musicians and artists to carpenters and tax accountants. The opportunities are limitless! Tell us about your special skill. _____

Protecting Youth & Teens

Ohio law requires YMCAs and other organizations serving children to inform any volunteer who may have unsupervised access to children in programs that the volunteer may be subject to a criminal background check. This check may be performed at any time and may include a request to be fingerprinted for the Ohio Bureau of Identification.

Applicant signature _____ Today's Date _____

