



# Upper Bucks YMCA - Volunteer Application

Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

DOB \_\_\_\_\_ Email \_\_\_\_\_

### Please indicate why you would like to volunteer at the YMCA.

- Community service       Pay It Forward       Special events
- Help the community       Graduation project       Confirmation project
- Other (Explain) \_\_\_\_\_

### Please indicate which days and times you are available.

	Mon	Tues	Wed	Thurs	Fri	Sat	Sun
Morning							
Afternoon							
Evening							

About how many hours total? \_\_\_\_\_ Any special certifications? \_\_\_\_\_

### Please select your area(s) of volunteer interest.

- Aquatics       Clerical       Youth Sports       Facilities Maintenance
- Pre-School       Fitness       Adult Sports       Babysitting
- Camp(Seasonal)  Teens       Other (Explain) \_\_\_\_\_

**The Upper Bucks YMCA may perform a criminal record history and/or PA child abuse history on volunteer applicants. The organization reserves the right to interview and accept or deny any applicant for volunteer positions at will.**

\_\_\_\_\_  
**Applicant Signature**

\_\_\_\_\_  
**Date**

For Internal Use Only:	
Department Assigned _____	Date Assigned _____
Event / Job _____	
Total Hours Completed _____	Date Completed _____
Director's Signature _____	