



YMCA of Greater Vancouver VOLUNTEER APPLICATION

Area(s) in which you would like to volunteer (Please check all that apply):

- Advisory Committees
- Administration / Clerical
- Aquatics
- Camps
- Children's Programs and Services
- Employment Programs
- Fitness Programs
- International Development
- Leadership Development
- Literacy
- Maintenance
- Member Services
- Newcomers to Canada Services
- Philanthropy / Fundraising
- Recreational Sports / Coaching
- Special Events
- Youth Leadership
- Other: _____

PERSONAL INFORMATION – Please give full, legal name

First Name(s) _____ Last Name _____
 Mr. Mrs. Miss Ms. _____

Address _____

City _____ Province _____ Postal Code _____

Home Phone (_____) _____ Work Phone (_____) _____

Cell Phone (_____) _____ Fax (_____) _____

Email _____

Emergency Contact Name _____ Phone (_____) _____

Are you a YMCA member? Yes; Location - _____ No

Birth Date, if under 19 years old (MM/DD/YY) _____

Please submit this completed application to your local YMCA. For a list of YMCAs, visit www.vanymca.org.

OUR MISSION

The YMCA is a charitable association dedicated to the development of people in spirit, mind and body as well as the improvement of local, national and international communities.

OUR CORE VALUES

- Caring*
- Honesty*
- Respect*
- Responsibility*

REFERENCES – Please list three (3)

(1) Name _____ Relationship to you _____
 Phone (_____) _____ Email _____

(2) Name _____ Relationship to you _____
 Phone (_____) _____ Email _____

(3) Name _____ Relationship to you _____
 Phone (_____) _____ Email _____

How did you learn about volunteering at the YMCA? _____

Why do you want to volunteer at the YMCA? _____

FOR OFFICE USE (Dates):

- Initial Contact _____
- Interview _____
- Reference Checks _____
- Criminal Record Check _____
- Stmnt of Understanding _____
- Certifications _____
- Orientation to P&P _____

Placement:

- Division _____
- Program/Department _____
- Volunteer Position _____
- Start Date _____
- End Date _____
- Primary Staff Contact _____

AS A YMCA VOLUNTEER,

- I am committed to supporting the YMCA Mission and Core Values.
- I understand that prior to commencing my volunteer activity at the YMCA:
 - I am required to provide the YMCA with a current Criminal Record Check.
 - I will complete all required documentation for new volunteers.
 - I will provide verification of training or certifications, if applicable.
 - I will be trained on the Policies and Procedures for YMCA volunteers.
 - I will receive from the YMCA specific training for my volunteer role.

I certify that the above information is true and complete to the best of my knowledge.

Signature _____ Date _____

Required for volunteers under 19 years of age:

Parent/Guardian Signature _____ Print Name _____