

# YouthAbility Thrift Shop

## Volunteer Form

**\*\*\*The information on this form is strictly for our records in case of emergencies\*\*\***

Full Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_

Have you ever been convicted of a felony? Yes or No

If yes, what for? \_\_\_\_\_

Have you ever been convicted of a crime against a minor? Yes or No

Have you ever been convicted of fraud or theft? Yes or No

Notes, Comments, and Concerns: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*\*Please be advised, by signing this form I understand that this is not an application of employment nor is it an offer or guarantee of employment with YouthAbility Thrift Shop or YouthAbility Inc.\**

Volunteer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature (if under 18): \_\_\_\_\_