## YMCA of Simcoe/Muskoka **VOLUNTEER APPLICATION**



Gender: F /	M Title: Mr/Mrs/Ms/Miss	s Name (First	., Last) :					
Address:								
Phone (home): Ph		none (other):	one (other):		Email:			
Work / School Name:		<u> </u>	<u> </u>			Date of Birth:		
Emergency Contact:								
Please ind	icate which day(s) and time(s	) you are availal	ole:					
MONDA	Y TUESDAY WEDN	IESDAY THU	IRSDAY	FRIDAY	SAT	URDAY	SUNDAY	
							,	
Why would	I you like to volunteer at the \	/MCA?		, ,		1	- ( )	
He	1 you like to volunteer at the to 1 p with S	econd	11ac	KS 1-	earn	10	ski	
$-\rho$	rogram							
PROGRAM	I PRÉFERENCES: Please prior	itize your top three	interests (A	ot all positions	are available	at all locati	ions)	
X	Ambassador	Providing information on the YMCA's work and community impact to participants and the community – Available in all departments						
	Child, Youth & Aquatics	Help a child or youth reach their potential! Includes preschool programs, childminding, child and youth programs and services, special events, aquatics and camp programs.						
X	Community Services	Provide neighbours in our community with services at our Child Care Centers, After School programs, Employment Services, Newcomer Services, or through our International Education program.						
	Facility	Get your hands dirty! Includes maintenance, cleaning and housekeeping.						
	Financial Development	Includes fundraising, special events, canvassing and administrative opportunities.						
X	Fitness & Recreation	Help others get active as a Volunteer Host, Trainer, Group Instructor or Facilitator.						
	Service & Sales	Includes greeting guests, administrative and clerical opportunities.						
APPLICAB	LE SKILLS List any appropriate	e skills - i.e. Certi	ficates hel	d (C.P.R., Aqu	uatics, etc.)	, Interests	and hobbies	
CURRENT	OR PAST VOLUNTEER EXPE	RIENCE						
	A VOLUNTEER							
	l am committed to supporting t nd that prior to commencing i							
. 0	I am required to provide the YI				ck (PRC)			
[1]	I will receive from the YMCA s							
D-	I agree to participate in perforr	marice evaluation	s and aller	iu professiona	ii developii	ieni course	es as required	
for the sole purp ensure the safel	above information is true and complete to the cose of managing a volunteer relationship. I c ly of YMCA participants, for statistical purpos al Development Department to further the YM	onsent to the YMCA do ses and to inform me abo	ing so, and I als out YMCA prog	so consent to the co	llection and use	of my persona	I information in order to	
Name:	Sig	gnature:			Date:			
Participant	t Pa	rticipant/Guardi	an					