



# YMCA Volunteer Application

Tuscaloosa YMCA

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Business Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Occupation: \_\_\_\_\_

Social Security # (Mandatory): \_\_\_\_\_ Employer: \_\_\_\_\_

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

Special Professional Training, Skills, Hobbies: \_\_\_\_\_

Community Affiliations (Clubs, Service Organizations, Etc.): \_\_\_\_\_

Previous Volunteer Experience (Including Year): \_\_\_\_\_

Do you have children in the program? Yes  No

If Yes, List Full Name and Level: \_\_\_\_\_

Special Certification (CPR, Medical, Etc.): \_\_\_\_\_

Do You Have a Valid Drivers License? Yes  No

Drivers License #: \_\_\_\_\_

Have You Ever Been Convicted Of or Plead Guilty To Any Crime? Yes  No

If Yes, Please Describe Each In Full: \_\_\_\_\_

Have You Ever Been Refused Participation In Any Other Youth programs? Yes  No

If Yes, Explain: \_\_\_\_\_

In Which Of The Following Would You Like To Participate? (Check One Or More)

- League Official  Coach  Umpire  Field Maintenance
- Manager  Scorekeeper  Concession Stand  Other

**A copy of government issued photo identification must be attached to complete this application.**



ID Number

Document Number

Please List Three References, At Least One Of Which Has Knowledge Of Your Participation As A Volunteer In A Youth Program:

Name

Phone

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As a condition of volunteering, I give permission to the YMCA organization to conduct a background check on me, which may include a review of sex offender registries, child abuse, and criminal history records. I understand that, if appointed, my position is conditional upon the league receiving no inappropriate information on my background. I hereby release and agree to hold harmless from liability the local YMCA, the officers, employees, and volunteers there of, or any other person or organization that may provide such information. I also understand that, regardless of previous appointments, YMCA is not obligated to appoint me to a volunteer position. If appointed, I understand that, prior to the expiration of my term, I am subject to suspension by the President and removal by the Board of Directors for Violation of YMCA policies or principles.

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

**Applicant Name (please print)**

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**NOTE: The local YMCA will not discriminate against any person on the basis of race, creed, color, national origin, marital status, gender, sexual orientation, or disability.**

**Local League Use Only:**

Background Check Completed By: \_\_\_\_\_

On Date \_\_\_\_\_

System(s) Used For Background Check:

Sex Offender Registry  Criminal History Records  \*LexisNexis

\*Please be advised that if you use LexisNexis and there is a name match in the few states where only name match searches can be performed you should notify volunteers that they will receive a letter directly from LexisNexis in compliance with the Fair Credit Reporting Act containing information regarding all the criminal records associated with the name, which may not necessarily be the YMCA volunteer.

Only attach to this application copies of background reports that reveal convictions of this application