



VOLUNTEER APPLICATION

Volunteerism is the willingness to help others without the expectation of pay or tangible benefit. Which of the following are you most interested in fulfilling:

- A school or work requirement # of hours needed: _____ by: _____
- A college internship requirement # of hours needed: _____ by: _____
- A community service requirement # of hours needed: _____ by: _____
- An on-going, scheduled position
- A one-time volunteer project

Questions about volunteering for the Y?
Contact 541-772-6295 x125
or volunteer@rvymca.org

VOLUNTEER OPPORTUNITIES:

Management

- Board Member
- Administrative Project

Financial Development

- Fundraising Campaigner
- Grant Writer
- Special Event Helper

Facilities

- Housekeeping
- Maintenance Project

Membership

- Receptionist
- Office Support

Aquatics

- Swim Lesson Instructor
- Water Fitness Instructor

Fitness

- Group Exercise Instructor
- Physical Education Instructor

Youth and Teen

- Youth Center Assistant
- Climbing Gym Attendant

Youth Sports

- Coach, which sport? _____
- Referee
- Team Parent

Preschool or Afterschool Program

- Classroom Helper
- Guest Speaker/Instructor (i.e. animals, juggling, special interest career)
- Enrichment Volunteer (i.e. science, foreign language, art, sports)

Camp

- Special Activity Instructor
- Day Camp Counselor
- Resident Camp Counselor (summer)
- RN Nurse (with certification)

Please mark your interests above and return to the Welcome Center

Name: _____ Date: _____

Are you a YMCA member? Yes No

What days and hours are you available? _____

VOLUNTEER APPLICATION

All applications are reviewed carefully but submission does not guarantee placement in a position. Note that volunteers are not covered by workers compensation insurance.

Name: _____ Age: _____ Date of Birth: _____

Address: _____
Street City State Zip

Phone Number: _____ Email: _____

Age groups you prefer to work with: _____

Do you have any physical limitations that might prevent you from engaging in physical activities? NO YES If yes, explain: _____

Why do you want to volunteer for the Rogue Valley Family YMCA? _____

What are some of the talents or skills you can share as a volunteer? _____

REFERENCES

LIST TWO PERSONAL REFERENCES AND ONE SHOULD BE A FAMILY MEMBER:

Name 1: _____ Relation to you 1: _____

Phone 1: _____ Email 1: _____

Name 2: _____ Relation to you 2: _____

Phone 2: _____ Email 2: _____

I certify that the information on this application is true, complete, and correct. I authorize the Rogue Valley Family YMCA to perform the necessary background checks to determine my qualifications for volunteer work and the safety of YMCA participants.

YOUTH PROTECTION CODE OF ETHICS: Our volunteers will exhibit the highest ethical best practices and personal integrity. Our volunteers will provide a professional work environment that is free from physical, psychological, written, or verbal intimidation or harassment. Our volunteers will not physically, sexually, or emotionally abuse or neglect a youth or adult. Our volunteers will share concerns about suspicious or inappropriate behavior with their supervisor or administrator. Our volunteers will accept their personal responsibility to protect youth and adults from all forms of abuse, and will report any suspected abuse or neglect of a youth to the state authorities.

Signature: _____ Date: _____

If the person applying as a volunteer is under the age of 18, a parent/guardian must sign below. Your signature indicates this application is made with your full approval.

Signature: _____ Date: _____