



FOR YOUTH DEVELOPMENT
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

LEAD SERVE GROW

Volunteering



PICKENS COUNTY YMCA
Working to Make a Difference.



**FOR YOUTH DEVELOPMENT
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY**

PERSONAL (Please give your FULL, LEGAL name)

Last Name	First Name	Home Phone: ()	day / evening
Street Address: City, State, Zip:		Are you a YMCA Member?	Yes / No
Ethnicity:		Date of Birth: __/__/__	Social Security No. ____-____-____
Emergency Contact Name:	Relationship:	Phone Number: ()	
Have you been convicted of, or plead guilty to, any criminal offense (other than a juvenile offense now expunged from your record) or released from prison in the past ten years? Have you ever been convicted of, or plead guilty to, a felony? Yes ___ No ___ If Yes, describe in full:			

STUDENT VOLUNTEERS

Are you looking to fulfill a school requirement or will you receive school credit for your service?	Yes / No
If YES, name of school: _____	Is this a Service-Learning Experience? Yes / No
Number of Hours needed: _____	Deadline to Complete Hours: _____

COMMUNITY SERVICE VOLUNTEERS

<p>The Pickens County YMCA accepts court ordered community service. Selection is based on many factors including YMCA needs, reason for community service assignment and your ability to fulfill tasks. We will contact you within 1-2 weeks if you have been approved to receive hours.</p>	
Offense resulting in community service:	Times/Days available:
Number of Hours needed:	Deadline to Complete Hours:

REFERENCES

For the safety of our participants, staff and volunteers, we complete at least 2 reference checks on every volunteer. References may include supervisors, co-workers, faith leaders, teachers or school counselors. Please do not list relatives/household members.

1	Name: _____ Relationship to you: _____	Phone Number: () _____ Email: _____
2	Name: _____ Relationship to you: _____	Phone Number: () _____ Email: _____
3	Name: _____ Relationship to you: _____	Phone Number: () _____ Email: _____

Background Certification: I certify that all of the information provided on this application is true and complete. I authorize the Pickens County YMCA to investigate and verify any and all information I have submitted. Because the YMCA strives to provide a safe environment for children and youth, I understand that the YMCA may order a criminal history check, and I authorize this investigation

Volunteer Terms: I agree to abide by the YMCA's policies, procedures and Code of Conduct. I understand the YMCA does not provide any health benefits (i.e. medical, dental, workers compensation, etc.) or any accident for me as a volunteer; I understand it is my responsibility to provide this coverage. I understand that the Pickens County YMCA does not provide volunteer compensation or trade volunteer services for membership or program fees.

Property Loss: I understand the Pickens County YMCA is not responsible for my personal property lost, damaged or stolen while participating in YMCA activities

Medical Treatment: I give permission for YMCA representatives to provide or arrange for emergency care for me, and to arrange for transport to an emergency center for treatment. I consent to medical treatment deemed immediately necessary or advisable by a physician if I am unable to act on my own behalf. I further understand that the YMCA is not responsible for payment for such medical treatment.

Release from Liability: I understand that accidents may occur during my volunteer activities. By signing below, I release the Pickens County YMCA, its agents, directors, consultants, and employees from all liability based on any damage, loss or injury, whether it is the result of ordinary negligence or otherwise, caused to me by my dependent from participation as a volunteer.

Volunteer/Community Service Applicant Signature

Parent Signature if Applicant Under 18

Date

Pickens County YMCA

WWW.PCYMCA.NET

Easley Branch P 864 855 9622

Pickens Branch P 864 878 8380

YMCA MISSION:

**TO PUT CHRISTIAN PRINCIPLES INTO
PRACTICE THROUGH PROGRAMS THAT BUILD
HEALTHY SPIRIT, MIND AND BODY FOR ALL.**