



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

PAV YMCA VOLUNTEER APPLICATION

Thank you for your interest in the YMCA!

If you would like to apply to join the YMCA volunteer team, please complete the application below.

- Be sure to write legibly
- The application must be completed in full.
- Do not leave any spaces blank or write "see resume" in response to any question.
- Read and sign the last page of the application.

A criminal background check may be required of any applicant who is selected for an interview or to whom a conditional offer of volunteering is made. A complete list of specific offenses which may disqualify an applicant from volunteering from a particular position due to federal, state or employer policy is available at www.pavymca.org or any branch location upon request.

Personal Information

Date: _____

Preferred YMCA Location: _____ Date Available: _____

NAME: _____ E-mail: _____
Last First MI

Address: _____ Age: _____
Street City State ZIP

Telephone: Home _____ / _____ Business _____ / _____ Mobile _____ / _____

Education

Occupation

Can you perform the essential functions of the job for which you are applying, with or without reasonable accommodation? Yes
 No

Areas of Interest: Youth Adult Seniors General

Type of volunteer work desired:

Office Front Desk Program Maintenance Special Events Pool
 Gym Babysitting Preschool Fitness Committee Board of Directors

Reason for volunteering: Social Involvement Service to Community Personal Satisfaction Other

In Case of Emergency Notify: _____

Contact Name

Phone Number

Physician's Name

Phone Number

Notice to All Applicants: The YMCA enforces its policies and practices to prevent child abuse.

Allegations or suspicions of child abuse are taken very seriously at the YMCA and will be reported to the proper authorities for investigation. We have abuse reporting procedures, there are unscheduled visits from supervisors, we have an open door for parents, and we have a code of conduct for volunteers. We minimize opportunities for abuse to occur and we talk with children about personal safety and touching limits. We also screen carefully to prevent abusers from being volunteers and we provide child abuse prevention training to staff and volunteers.

PAV YMCA

2947 S. Oak Park Ave. Berwyn, IL 60402

P 708.749.0606 F 708.749.7793 W www.pavymca.org

Employment Application

Personal References			At least one reference must be a relative but no reference may be an past employer. List employer in employment section.		
Name: _____	Occupation: _____	Years Known: _____			
Address: _____	City: _____	State: _____ Zip: _____			
E-mail: _____	Phone: _____ / _____	Alternate #: _____			
Name: _____	Occupation: _____	Years Known: _____			
Address: _____	City: _____	State: _____ Zip: _____			
E-mail: _____	Phone: _____ / _____	Alternate #: _____			
Name: _____	Occupation: _____	Years Known: _____			
Address: _____	City: _____	State: _____ Zip: _____			
E-mail: _____	Phone: _____ / _____	Alternate #: _____			

PLEASE READ CAREFULLY BEFORE SIGNING.

Waiver
 Participants specifically assume all risks of injury arising out of his/her presence on or about the premises, or his/her use or intended use of equipment or facilities or his/her use participation in the activities of the Young Men's Christian Association of Berwyn - Cicero, Inc. (Pav YMCA in Berwyn), an Illinois Charter Corporation, on or about the premises or at another location and does hereby, for himself/herself, his/her heirs, executors and administrators waive, release and agree to hold free from all Officers, Directors, Board of Directors, Advisory Board, Members, Employees or Agents.

Signature of Volunteer (over 18)	Signature Of Parent/Guardian	Date
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IF VOLUNTEER IS AT LEAST 18 YEARS OLD, THEN VOLUNTEER MUST READ AND SIGN BELOW:
 I understand as a volunteer, that I am not an employee of the Pav YMCA and understand and agree that I will not receive any compensation or benefit nor be eligible for any coverage under the Illinois Workers Compensation Laws.

I HAVE CAREFULLY READ THE FOREGOING STATEMENT, UNDERSTAND ITS CONTENTS, AND ACKNOWLEDGE THAT I AM SOLELY RESPONSIBLE FOR ANY INJURIES INCURRED WHILE VOLUNTEERING WITH THE PAV YMCA.

Printed Name of Volunteer	Signature Of Volunteer	Date
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IF VOLUNTEER IS UNDER 18 YEARS OLD, THEN BOTH PARENTS/GUARDIANS MUST READ AND SIGN BELOW:
 I understand as my minor child is a volunteer, that my minor child is not an employee of the Pav YMCA and understand and agree that my minor child will not receive any compensation or benefit nor be eligible for any coverage under the Illinois Workers Compensation Laws.

I HAVE CAREFULLY READ THE FOREGOING STATEMENT, UNDERSTAND ITS CONTENTS, AND ACKNOWLEDGE THAT I AM SOLELY RESPONSIBLE FOR ANY INJURIES INCURRED BY MY MINOR CHILD WHILE HE OR SHE IS VOLUNTEERING WITH THE PAV YMCA.

Printed name of Parent/Guardian	Signature of Parent/Guardian	Date
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Printed name of Parent/Guardian	Signature of Parent/Guardian	Date
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DISCLOSURE REGARDING BACKGROUND INVESTIGATION

YMCA of Berwyn Cicero Inc. may obtain information about you from a third party consumer reporting agency for employment purposes. Thus, you may be the subject of a "consumer report" which may include information about your character, general reputation, personal characteristics, and/or mode of living. These reports may contain information regarding your, criminal history, social security verification, motor vehicle records ("driving records"), verification of your education or employment history, or other background checks.

You have the right, upon written request made within a reasonable time, to request whether a consumer report has been run about you and to request a copy of your report. These searches will be conducted by Verified First, 1550 South Tech Lane, Suite 200, Meridian, Idaho 83642; Tel 888.670.9564

www.verifiedfirst.com

The scope of this disclosure allows the Company to obtain consumer reports now and throughout the course of your volunteerism for an volunteerism purpose to the extent permitted by law.

Signature: _____

Date: _____