



Date Received: \_\_\_\_\_

# Volunteer Application Form

Thank you for your interest in the YMCA of Kingston. The YMCA of Kingston is a “community-centered” Canadian charity where members, volunteers, and staff work together to foster the development of spirit, mind and body of individuals and families. This is achieved by delivering programs that respond to needs in our community in a secure, caring, convenient and affordable environment.

A criminal reference check, performed by the City of Kingston Police Department, is required of all volunteers prior to commencement of any volunteer duties at the YMCA of Kingston. Criminal reference checks that have been completed in the last 120 days for other organizations or institutions are acceptable.

**PLEASE PRINT:**

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

City: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Best time to contact you: \_\_\_\_\_ E-mail: \_\_\_\_\_

**Please check how you learned about volunteering at the YMCA of Kingston.**

- Member
- Volunteer Kingston
- YMCA Staff/Volunteer
- Other: \_\_\_\_\_

**Please check the time(s) you are available to volunteer.**

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
<input type="checkbox"/> morning	<input type="checkbox"/> morning	<input type="checkbox"/> morning	<input type="checkbox"/> morning	<input type="checkbox"/> morning	<input type="checkbox"/> morning	<input type="checkbox"/> morning
<input type="checkbox"/> afternoon	<input type="checkbox"/> afternoon	<input type="checkbox"/> afternoon	<input type="checkbox"/> afternoon	<input type="checkbox"/> afternoon	<input type="checkbox"/> afternoon	<input type="checkbox"/> afternoon
<input type="checkbox"/> evening	<input type="checkbox"/> evening	<input type="checkbox"/> evening	<input type="checkbox"/> evening	<input type="checkbox"/> evening	<input type="checkbox"/> evening	<input type="checkbox"/> evening
Morning (open-12:00pm)			Afternoon (12:00-6:00pm)		Evening (6:00pm-close)	

**Please check which description(s) fits your current status:**

- Employed full-time
- Student full-time
- Retired
- Stay-at-home parent
- Employed part-time
- Student part-time
- Other (please name) \_\_\_\_\_

**Please check what areas/programs are of interest to you (you may check more than one box):**

- Administrative (data entry, tours, etc.)
- Child Care (Day Care, School-Age Care, Babysitting)
- Day Camps (summer, winter, March break)
- Events (3-on-3 basketball tournament, Fun Runs, etc.)
- Fitness Centre (strength trainer)
- Fundraising
- Group Fitness (aerobics instructor, aquafit instructor)
- Pool (lifeguarding, instructing, etc.)
- Pre-school, Youth and Teen Recreation (basketball, soccer, dance, squash, etc.)

**Which YMCA location would you prefer to volunteer at?**  Wright Crescent  YMCA West  No preference

PLEASE NOTE: Volunteering in certain areas may have age specifications or may require specific qualifications, certifications or experience. For current program descriptions, please see the current Program Brochure.

...Over

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# Volunteer Application Form

Current or Past Volunteer Experience (related or other):

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Please share some of your personal reasons for becoming a volunteer and what you would like to get out of this experience:

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### References:

Name	Email Address	Phone Number	Relationship

Volunteer statement:

I understand that the YMCA will be collecting, creating, using and disclosing my personal information for the purpose of establishing and managing a volunteer relationship.

I consent to the YMCA doing so, and I also consent to the collection and use of my personal information in order to ensure the safety of YMCA participants, for statistical purposes, and to inform me about YMCA programs or services. I consent to the release of my name and address to the YMCA's Financial Development Department to further the YMCA's philanthropic activities.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

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