



VOLUNTEER APPLICATION

Name: _____

Address: _____ City _____, State _____ Zip _____

Phone: _____ Email: _____

Date of Birth: _____ Social Security Number: _____ - _____ - _____

Gender (circle): Male Female Race (circle): Hispanic African American Caucasian Other

Employer: _____ Job Title: _____

Supervisor: _____ Employer Phone: _____

Emergency Contact: _____ Relationship: _____

Emergency Contact Phone (day): _____ Phone (evening) _____

Highest Level of education completed _____ School _____

Have you ever been convicted of a felony? If yes, explain _____

Is this volunteer service court-ordered? Yes No (If Yes, please explain)

What kind of service would you like to participate in: (please check only one)

ON-GOING _____ SHORT TERM _____ SPECIAL PROJECT _____

What date are you available to start volunteer service? _____

How many hours per week can you volunteer? _____

What days and times are you available?

Day	Time(s)
Monday	
Tuesday	
Wednesday	
Thursday	
Friday	
Saturday	



Club Preference: ___ Northside ___ Fort Mill ___ Rock Hill Teen Center ___ Catawba Teen Center ___ Clover Outreach

Please check a Program Area that interests you:

- ___ Character & Leadership Development
- ___ Health & Life Skills
- ___ The Arts
- ___ Sports, Fitness & Recreation
- ___ Education & Career Development

Group Preference:

Gender : Males ___ Females ___ Either ___

Grade: K-5 ___ 6-8 ___ 9-12 ___

T-shirt size: S M L XL XXL

Why do you want to volunteer at the Boys & Girls Clubs of York County?

Do you have previous volunteer experience? If so, please list the organization and the capacity in which you volunteered.

Are you limited in your activities due to health issues? Yes No (If Yes, please explain)

All volunteers must complete this application and submit to a background check prior to being assigned to a Club. If you have any questions, please contact Rasheeda White at 803-412-5931 or rwhite@bgcyc.org.

I hereby authorize the Boys & Girls Clubs of York County to seek criminal history records pertaining to me, which may be in the files of any local, state, or national criminal justice agencies.

I further understand that information obtained during the investigation(s) will be the basis for the approval or denial of my volunteer service. I understand that refusal to sign this release will result in termination of the application process. Boys & Girls Clubs of York County will hold all information strictly confidential.

Signature: _____

Date: _____