



YMCA  
We build strong kids,  
strong families, strong communities.

**CENTRAL COAST YMCA  
VOLUNTEER APPLICATION FORM**

Branch

- \_\_\_\_\_ Salinas Community YMCA
- \_\_\_\_\_ Watsonville Family YMCA
- \_\_\_\_\_ YMCA of the Monterey Peninsula
- \_\_\_\_\_ South County YMCA
- \_\_\_\_\_ YMCA of San Benito County
- \_\_\_\_\_ Corporate Office

This association does not discriminate in securing volunteers because of race, color, national origin, ancestry, sex, religion, age, mental or physical disability, veteran status, medical condition, marital status, sexual orientation, pregnancy or any other characteristic protected by federal, state or local law.

Name \_\_\_\_\_

Today's Date \_\_\_\_\_

Address \_\_\_\_\_

Phone (home) \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Phone (business) \_\_\_\_\_

Present Employment \_\_\_\_\_

Retired \_\_\_\_\_

Emergency Contact Name \_\_\_\_\_

Phone \_\_\_\_\_

Are you currently a YMCA member? \_\_\_\_\_

Social Security Number: \_\_\_\_ - \_\_\_\_ - \_\_\_\_

Have you ever used another name that we would need in order to verify your experience and education?  
If yes, indicate such name and the date the name changed: \_\_\_\_\_

Have you ever been convicted of a crime (felony/misdemeanor), or entered a plea of guilty/no contest to a crime?  
 Yes  No *Do not disclose convictions related to the possession or use of marijuana more than two years ago.*

If yes, state when, where, and the nature of such conviction: \_\_\_\_\_

**FOR JOBS REQUIRING DRIVING**

1. Do you have a valid driver's license in this state? No Yes # \_\_\_\_\_

2. Do you have a valid Class B license in this state? No Yes

3. Do you possess a youth bus/school bus driver's certificate? No Yes Are you over 21? No Yes

4. Traffic violations within the last 3 years? No Yes

If yes, please explain

\_\_\_\_\_

\_\_\_\_\_

**PLEASE READ BEFORE SIGNING:**

The Central Coast YMCA and its branches are committed to providing a safe environment for our members, participants, volunteers and employees. We are aware that there are people who seek relationships working near children for the wrong reasons. We make an active effort to prevent child abuse, which may include but is not limited to the following:

Fingerprinting for background check purposes and references which may include past employers and volunteer organizations.

Periodic interviews/evaluations are conducted with children and parents regarding day-to-day experiences, encouraging reports of out of the ordinary events. Any allegation or suspicion of child abuse is taken seriously and may be reported to the police and state agencies for investigation.

I have read and understand the information stated above. I understand that the YMCA will conduct a thorough check of my background and conduct periodic interviews and/or evaluations with children and parents to encourage reports of anything out of the ordinary.

I understand that any allegation or suspicion of child abuse is taken very seriously by the YMCA and may be reported to the State for investigation and that the YMCA will fully cooperate with any related investigations and will pursue the prosecution of child abusers to its full extent under the laws of the State.

I hereby affirm that my answers to questions on the application are true and correct, and that I have not knowingly withheld any fact or circumstances that would, if disclosed, affect my application unfavorably. I understand that any false information submitted in this application may result in my discharge; and that my service is subject to government regulations, YMCA's review and acceptance of fingerprint record and proof of minimum age.

I hereby waive any right to claim that any request or investigation is an invasion of my privacy, since they are made with my consent.

**Release, Waiver and Indemnity Agreement**

In consideration of being permitted to utilize the YMCA (or for my children to so participate) for any purpose, including but not limited to observation, use of the YMCA's facilities or equipment, participation in athletic activities, exercise classes, sports programs including any off-site program affiliated with the YMCA, I understand that the YMCA assumes no responsibilities for injuries or illness that I may sustain as a result of my physical condition or resulting from my participation in any of the foregoing activities.

I hereby (and on behalf of my children) release, discharge and agree not to sue the YMCA, its employees, officers, or directors (hereinafter referred to as 'releasees') for any and all claims for injury, illness, death, loss or damage that I may suffer as a result of my participation in these activities.

I hereby agree to indemnify and save and hold harmless the releasees from any loss, liability, damage or cost they may incur due to my presence (or my children's presence) in or about the YMCA premises or in any way observing or using any facilities or equipment of the YMCA, or participating in any program affiliated with the YMCA.

I agree to assume full responsibility for bodily injury, death or property damage for myself (and for my children) while in, or about the premises of the YMCA and/or while using any facilities or equipment, or participating in any program affiliated with the YMCA, including any off-site program.

I further agree that the foregoing Release, Waiver and Indemnity Agreement is intended to be as broad and inclusive as is permitted by the law of the State of California and that if any portion is held invalid, the balance shall continue in full legal force and effect.

I have read and understand this Release, Waiver and Indemnity Agreement. I voluntarily sign the above and further agree that no oral representations, apart from the foregoing written agreement have been made.

\_\_\_\_\_  
Signature of Applicant/Parent

\_\_\_\_\_  
Name of Child

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Name of Child

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name of Child