

- Kelowna Family Y
- H₂O Adventure + Fitness Centre
- Career Contact Centre for Youth (Downtown)

Volunteer Application

Personal Information:

Name:	Date:
Address:	Postal Code:
Home Phone No.:	Work Phone No.:
Fax No.:	E-mail:

Volunteer Areas (please indicate in order of preference areas you would like to volunteer in):

<p>Kelowna Family YMCA-YWCA</p> <ul style="list-style-type: none"> <input type="checkbox"/> Aquatics (<i>min 14+ yrs</i>) <input type="checkbox"/> Member Services (<i>min 16 yrs</i>) <input type="checkbox"/> Administration (<i>min 19 yrs</i>) <input type="checkbox"/> Group Fitness (<i>certification <u>may</u> be required</i>) <input type="checkbox"/> Weight Room (<i>certification <u>may</u> be required</i>) <input type="checkbox"/> Maintenance <input type="checkbox"/> Children & Youth Programs 	<p>H₂O Adventure + Fitness Centre</p> <ul style="list-style-type: none"> <input type="checkbox"/> Aquatics (<i>min 14+ yrs</i>) <input type="checkbox"/> Member Services (<i>min 16 yrs</i>) <input type="checkbox"/> Administration (<i>min 19 yrs</i>) <input type="checkbox"/> Group Fitness (<i>certification <u>may</u> be required</i>) <input type="checkbox"/> Weight Room (<i>certification <u>may</u> be required</i>) <input type="checkbox"/> Maintenance <input type="checkbox"/> Children & Youth Programs
<p><input type="checkbox"/> Employment Programs @ Career Contact Centre</p>	<p><input type="checkbox"/> Board of Directors Full Résumé, references required</p>

Availability: What days and hours are you available?

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday

Why would you like to volunteer at the YMCA-YWCA?

Please list the skills or abilities that you feel you could bring to a volunteer position:

Previous Experience (Volunteer or Work; attach resume if applicable):

Name of Organization	Dates	Address	Position

References (please supply name and telephone number):

Name	Relationship	Phone #1	Phone #2

Please Read Carefully Before Signing:

I understand and agree that volunteering and continued volunteer service with the YMCA-YWCA of the Central Okanagan are conditioned upon:

1. Observance of the rules, regulations, and instructions governing volunteerism by the Centre as in effect at the time of volunteering, or established at any subsequent time;
2. Fulfilling a criminal record check;
3. The verification of statements made by me in this application.
4. References will be checked

By signing this application form, I give consent for the Y to collect, use and disclose this personal information for the purposes of applying for a volunteer position or student placement with the YMCA-YWCA.

I voluntarily authorize whatever legal references the YMCA-YWCA wishes to make and release from all liability or responsibility all persons applying for such information.

Signature: _____

Date: _____

Please Forward Volunteer Applications To:

Kelowna Family Y

Attn: Colleen Corless, 375 Hartman Road Kelowna V1X 2M9
 Fax: 250.765.7962 or e-mail: info@ymca-ywca.com

H2O Adventure + Fitness Centre

OR Attn: Danielle Miranda, 205-2000 Enterprise Way. Kelowna BC. V1Y 9S9
 Fax: 250.860.7918 or e-mail: info@ymca-ywca.com

Office Use Only:

Date received: _____

By (staff or volunteer): _____

Please put in Volunteer Admission Department Box

Updated March 2009