



I would like to shop with Reidsville Y on the following 2011 dates (check with Y for exact times):
 ___ Tues, Aug 2 (evening) Wed, Aug 3 (day trip) ___ Thurs, Aug 4 (evening)
Volunteers must be 18 and bring driver's license for identification when signing in for shopping event.

FOR YOUTH DEVELOPMENT
 FOR HEALTHY LIVING
 FOR SOCIAL RESPONSIBILITY

Your T-Shirt Size ___S ___M ___L ___XL ___XXL ___XXXL

ENSURE A BRIGHTER FUTURE TODAY

BRIGHT BEGINNINGS

Back-to-School Program
 YMCA OF GREENSBORO

Volunteer Application

Thank you for volunteering! Please take a few minutes to complete the following information.

Name _____ Date _____
Last First Middle

Address _____ City _____ State _____ Zip _____

Home Phone _____ Work Phone _____ Cell Phone _____

Email _____ Your Date of Birth _____

Company Name _____ Organization Name: _____
(such as church or Jaycees)

Emergency Contact Name _____ Phone _____

Have you ever been convicted of any crime? Yes No

If yes, please provide details below including the nature of the offense, when and where it occurred, the disposition of the case and the name under which you were convicted. A conviction will not necessarily be a bar to volunteering. It will be used only for volunteer-related purposes and only to the extent permitted by applicable laws. List all convictions: _____

Is this your first year with Bright Beginnings? Yes No If no, please list number of years: _____

Please check the areas below in which you are currently involved:

Are you a YMCA Board Member? Yes No

Are you a Book Bag Volunteer? Yes No

Are you a YMCA Member? Yes No

Are you a Fund Raising Volunteer? Yes No

Are you a YMCA Program Member? Yes No

Other involvement: _____

| | |
|------------------------------------|--|
| FOR STAFF USE ONLY: | INFO NEEDED NIGHT OF SHOPPING EVENT: |
| Volunteer's Identification # _____ | <input type="checkbox"/> Driver's Lic <input type="checkbox"/> SS# |
| Date _____ Store _____ | Child _____ |
| Date _____ Store _____ | Child _____ |

