

SCHEDULE PREFERENCE

Shifts Available Between: 3PM-6PM Monday thru Friday; Thursdays 1PM - 6PM

Minimum Requirements: 2 hrs per week

- Monday: _____
- Tuesday: _____
- Wednesday: _____
- Thursday: _____
- Friday: _____

Hours per week: _____
 For how long: _____
 Start Date: _____

Total Hours needed (if applicable): _____

REFERENCES

Please choose one or two adults who can tell us what kind of person you are. If you are in high school, at least one must be a teacher from your school AND their signature is mandatory before you begin your volunteership.

Name: _____ How may we contact you?: _____

Comments: _____
Signature: _____

Name: _____ How may we contact you?: _____

Comments: _____
Signature: _____

VOLUNTEER SIGNATURE:

I hereby apply to become a Volunteer at the Boys & Girls Club of West San Gabriel Valley. I agree to obey the rules of the Club, its officials and staff members. I certify that the responses given by me to the foregoing questions and statements are true and without omissions. I certify that I am at least 15 years of age (or in my sophomore year of high school). I authorize the Boys & Girls Club to investigate and/or verify the foregoing information, and any information that may assist them in determining my qualifications for volunteering. If upon such investigation, anything contained in this application is found to be untrue, I release the Boys & Girls Club and all others from liability damage. I hereby acknowledge and agree to comply with said policies and procedures. I understand that while I am signed in as a volunteer I will follow the directions of the staff and perform all tasks to the best of my ability. I understand that any person who gives false information will be subject to immediate dismissal from the volunteer program.

Signature of Volunteer Date

PARENT SIGNATURE (if volunteer is under 18):

I hereby approve of my child's application to Volunteer at the Boys and Girls Club of West San Gabriel Valley, and give my consent to his/her being given a Physical Examination, Emergency Treatment by a physician or hospital in case of an accident or emergency. We also agree to hold harmless the Boys & Girls Club of West San Gabriel Valley for any accident which may occur to our child and waive all liability claims against the Club's, Board of Directors, Staff / Volunteers. I also give the Boys & Girls Club permission to check any of the above statements made by my child and or any necessary background or references checks.

Parent Signature Date

The Boys & Girls Club of West San Gabriel Valley aims to enable all young people, especially those who need us the most, to reach their full potential as responsible, productive, caring citizens.

328 S. Ramona Ave. | Monterey Park CA | 91754 | (626) 573-2831

volunteer@wsgvbgc.org

Website: www.wsgvbgc.org

For Office Use Only

- COMMUNITY SERVICE VOLUNTEER
- GENERAL VOLUNTEER
- MEMBER
- SCHOOL REQUIREMENT
- PARENT
- OTHER