



YMCA of Eastern Ontario Volunteer Application

*Building healthy
communities*

Please share some of your personal reasons for becoming a volunteer and what you would like to get out of this experience:

**References – Please provide three professional references
By providing names and contact information, you are providing the YMCA permission to contact.**

Name	Relationship
Email	Phone
Name	Relationship
Email	Phone
Name	Relationship
Email	Phone

Certifications & Training

- Standard First Aid with CPR C
 National Lifeguard
 Bronze Cross
 Personal Trainer
 Swim Instructor
 Individual Conditioning
 Fitness Instructor
 Child & Youth Diploma
 Early Childhood Educator

Please list any other relevant certifications or designations: _____

I understand the YMCA will be collecting, using and disclosing my personal information for the purpose of establishing and managing volunteer relationships. I consent to the YMCA doing so, and I also consent to the collection and use of my personal information in order to ensure the safety of YMCA participants, for statistical purposes, and to inform me about YMCA programs or services. I consent to the release of my name and address to the YMCA's Financial development department to further the YMCA's philanthropic activities.

Signature

Date: month / day /year