

Volunteer Application

Date: _____



BOYS & GIRLS CLUBS
OF THE KENAI PENINSULA

Name: _____
Last First MI

Physical address: _____

_____ City Zip

Telephone number: _____ Are you 18 years of age or older? Yes No

Email address: _____ I would like to receive Boys & Girls Clubs e-newsletters.

Birthday: _____ Social Security No: _____
Month / Day / Year

Driver's License No., State, & Expiration: _____

List all legal names used for the past 7 years: _____

Have you ever been convicted of a crime? Yes No

If you answer yes, list all convicted activities: _____

Consent and Authorization to Conduct Criminal Background Check: The Boys & Girls Clubs of the Kenai Peninsula (B&GCKP) prohibits any Club, Club-related and/or athletic programs from allowing any person to volunteer their services who has been convicted of a crime involving moral turpitude or involving violence or bodily harm to others; such crimes include but are not limited to barrier crimes as recognized by the State of Alaska. Therefore, let my signature verify that I have read, understand and give consent to B&GCKP to examine my local, state and federal criminal record, if any, for the purpose of determining my eligibility to volunteer at B&GCKP.

Signature _____ Date _____

Parent/ Guardian Signature _____ Date _____

Why would you like to volunteer for Boys & Girls Clubs: Have a child in the program

Expertise or Athletic Talents Parent suggestion HS/ college credit

Other (please elaborate) _____

Please describe your previous volunteer experiences: _____

Please give three (3) references, include full name and telephone numbers:

Are you certified in: CPR Expires: ___/___/___ First aid Expires: ___/___/___ EMT Expires: ___/___/___

Please list other training or special skills/ interests (e.g. crafts or foreign language): _____

If applying to coach, please complete the following section:

Which sport would you like to coach? Clinic Basketball Flag Football Soccer Indoor Soccer

Girls Boys Co-ed Age-group: _____ Location: _____

Did you coach last season? Yes No Team name: _____

Would you like to coach the same division? Yes No

Would you like your child on your team (must be appropriate age division)? Yes No N/A

If more than one child, which child would you like to coach? _____

In case of an emergency, please contact:

Name _____ Telephone _____

Voluntary Self-Identification (Confidential and for statistical purposes only):

Alaska Native American Indian Black or African American Asian White
 Native Hawaiian or Pacific Islander Two or more races Hispanic or Latino

I understand that photographs and video tapes may be made of my volunteer activities at Boys & Girls Clubs. I authorize Boys & Girls Clubs, without limitation, to copy, publish, exhibit or distribute such photographs or videotapes for the purpose of reporting or promoting volunteer activities. I waive all rights or claims I may have against your organization and/ or its agents, subsidiaries or assignees related to the above photos or videotapes.

Initials _____ Parent/Guardian Initials _____

I certify that all the information contained in this application is true and correct to the best of my knowledge. I hereby authorize and empower Boys & Girls Clubs of the Kenai Peninsula or persons employed on their behalf to investigate all statements contained in this application. I authorize educational institutions, employers and references listed above to give you any and all information concerning my education, employment and fitness to work with children and young people. I further agree to release and hold harmless Boys & Girls Clubs of the Kenai Peninsula, institutions and references above and any law enforcement agency, from liability and any damage that may result from providing this information to you. I understand that consideration of volunteer positions within Boys & Girls Clubs of the Kenai Peninsula does not establish an employment relationship. No insurance coverage is provided to any volunteer, specifically, no worker's compensation, accident or health insurance. All volunteer service is at the volunteer's own risk.

I agree to abide by all rules and policies adopted by Boys & Girls Clubs for volunteers.

Signature _____ Date _____

Parent/ Guardian Signature _____ Date _____

Director's Signature _____ Date _____

Volunteer Tasks Shall Include:

