



BOYS & GIRLS CLUBS
OF SANTA CRUZ COUNTY

Downtown: 543 CENTER ST • SANTA CRUZ, CA 95060 • 831-423-3138
Live Oak: 925 17TH AVE • SANTA CRUZ, CA 95062 • 831-477-4095
Scotts Valley: 5060 SCOTTS VALLEY DR • SCOTTS VALLEY, CA 95066 • 831-535-7017

www.boysandgirlsclub.info
bgcsantacruz@gmail.com

Office Use Only

New Applicant? Yes No Club Member?

Requested By: _____ Due: _____

Bkgrnd Ck Date _____ Results _____

COMET ID: _____ ID tag

YOUTH VOLUNTEER APPLICATION

(Please Print)

Name: _____ Phone (Home): _____

Address: _____ Phone (Cell): _____

City: _____ E-mail: _____

State: _____ Zip: _____ Age: _____ Birthday: _____ School: _____

At which Clubhouse are you most interested in volunteering? Downtown Live Oak Scotts Valley

Are you interested in participating as a long- or limited-term weekly volunteer? Yes No

If yes, what area(s) of programming interest you most?

- | | | |
|---|---|--|
| <input type="checkbox"/> Education/Tutoring | <input type="checkbox"/> Games Room | <input type="checkbox"/> Pre-School/Kinder Buddy |
| <input type="checkbox"/> Fine Arts/Crafts | <input type="checkbox"/> Technology/Computers | <input type="checkbox"/> Music/Performing Arts |
| <input type="checkbox"/> Sports/Fitness | <input type="checkbox"/> Teen Programs | <input type="checkbox"/> Front Desk/Admin |

Please fill in the days and times that you are available to volunteer.*

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Times						

Total number of hours each week you are available to volunteer: _____

Estimated length of commitment (e.g. 3 months, 6 months, indefinitely, etc.): _____

List any special skills, areas of knowledge and/or experience (including non-English languages):

List any previous volunteer experiences (include name of organization) or experience working with youth.

Please provide two personal references.

Name: _____ Relation: _____ Phone: _____

Name: _____ Relation: _____ Phone: _____

Emergency Contact:

Name: _____ Relation: _____ Phone: _____

How did you learn of Boys & Girls Clubs of Santa Cruz County?

Are you a former member of a Boys & Girls Club? Yes No

NOTE: Providing the following information is strictly voluntary and confidential. It allows us to better assess our community outreach and is not used in any manner to make decisions or judgments regarding a prospective volunteer.

Gender: Female Male

Race/Ethnicity:

- | | | |
|---|--|---|
| <input type="checkbox"/> Asian/Pacific Islander | <input type="checkbox"/> Black, non-Hispanic | <input type="checkbox"/> Native American/Native Alaskan |
| <input type="checkbox"/> South Asian | <input type="checkbox"/> Hispanic/Latino | <input type="checkbox"/> Mixed-Ethnicity |
| <input type="checkbox"/> Middle Eastern/North African | <input type="checkbox"/> White, non-Hispanic | <input type="checkbox"/> Other _____ |

Voluntarism At-Will

Every Club volunteer has an at-will relationship with the Club. Volunteers are free to resign their position at any time, just as the Club is free to terminate a volunteer for any reason at any time.

Volunteer Count

Volunteers are a vital part of our organization. We keep an accurate count of the number of volunteer and the amount of hours they serve at the Club on a daily, weekly and monthly basis. We ask that all volunteers sign in and out on a daily basis. We also ask that all volunteers wear a volunteer name badge to be easily recognized by staff, member, and parents.

Manner and Professionalism

Volunteers are expected to behave in an appropriate and professional manner at all time. Volunteers are viewed as role models to the members and should always keep this in the forefront when interacting or assisting in the program areas.

BY SIGNING THIS DOCUMENT I AGREE TO THE ABOVE RULES OF CONDUCT AND I AM AWARE THAT BOYS & GIRLS CLUBS OF SANTA CRUZ COUNTY MAY CONTACT THE REFERENCES I HAVE LISTED.

Applicant Signature: _____

Date: _____

**PLEASE RETURN COMPLETED APPLICATIONS IN PERSON
TO AN ORIENTATION AT YOUR PREFERRED CLUBHOUSE:**

<p>Downtown Clubhouse 543 CENTER ST SANTA CRUZ, CA 95060 (831) 423-3138</p> <p>Orientations: TUESDAY 5PM or FRIDAY 1PM</p>	<p>Live Oak Clubhouse 925 17th AVE SANTA CRUZ, CA 95062 (831) 477-4095</p> <p>Orientations: MON – FRI 2PM - 7PM</p>	<p>Scotts Valley Clubhouse 5060 SCOTTS VALLEY DR SCOTTS VALLEY, CA 95066 (831) 535-7017</p> <p>Orientations: MON – FRI 2PM - 7PM</p>
--	---	--



*Propelling Nonprofits
Empowering Volunteers*

113 South College Ave.
Fort Collins, CO 80524
VerifiedVolunteers.com



**BOYS & GIRLS CLUBS
OF SANTA CRUZ COUNTY**

Date _____

I, the undersigned parent or legal guardian of _____ (full name including MIDDLE NAME), do hereby consent, on behalf of myself and said child, to have a background report prepared by Verified Volunteers and delivered to Boys & Girls Clubs of Santa Cruz County for use for volunteer purposes consistent with the disclosure and authorization provided to said child.

Youth Info:

Social Security Number

Current Address

Since Date

Signature of Legal Parent or Guardian

Print Name