



Revised 6-29-11  
**YMCA of Middletown**  
**VOLUNTEER APPLICATION**

**NAME OF EVENT** \_\_\_\_\_

Type of POSITION desired:	Date available:	
Are you presently employed? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, may we contact your present employer? <input type="checkbox"/> YES <input type="checkbox"/> NO		
	Have you ever been employed by the YMCA of Middletown or any YMCA association/branch? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, when?	
How did you receive information about this event of the YMCA of Middletown? <input type="checkbox"/> Advertisement <input type="checkbox"/> Walk-In <input type="checkbox"/> Agency <input type="checkbox"/> Other (please specify) _____ _____		

: <b>INTEREST AND SPECIAL SKILLS:</b> List Special Training or Skills:

**REFERENCE DATA**

**PERSONAL/PROFESSIONAL REFERENCES WE MAY CONTACT**  
*(PLEASE PROVIDE AT LEAST 2 PROFESSIONAL AND 1 PERSONAL REFERNECE)*

Name	Address	Phone ( )

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**My signature below certifies that I have read and understand the foregoing and to the best of my knowledge and belief, the information on this form or other written attachment is true and correct.**

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Applicant Signature

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Date of Application



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