



**FOR YOUTH DEVELOPMENT  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY**

### YMCA OF SAN JOAQUIN COUNTY SPORTS VOLUNTEER APPLICATION

Name \_\_\_\_\_ Sex M F Age \_\_\_\_\_ Birthdate \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Occupation \_\_\_\_\_

Type of volunteer position you are applying for:      Coach      Asst. Coach      Official

Regarding this sport: \_\_\_\_\_

Have you played this sport?      Yes      No

Have you coached this sport?      Yes      No

If yes, what was the age of your team members? \_\_\_\_\_

Who was the sponsoring agency? \_\_\_\_\_

Would you have contacts for sponsorships for your team? \_\_\_\_\_

Describe the skills/characteristics/experience/certifications you possess that would help you succeed as a YMCA Youth Sports volunteer:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

When are you available to volunteer?

Days of the week:      Monday      Tuesday      Wednesday      Thursday      Friday      Saturday      Sunday

Between the hours of: \_\_\_\_\_

Comments: \_\_\_\_\_

References:

Name \_\_\_\_\_ Phone \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_ Relationship \_\_\_\_\_

Do you have a child presently involved in the YMCA Youth Sports Program?      Yes      No

If yes, indicate the child's name \_\_\_\_\_ Age \_\_\_\_\_

I understand that all YMCA Youth Sports coaches and officials are required to participate in a preseason-training event.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date