



BOYS & GIRLS CLUB

OF SOUHEGAN VALLEY

P.O. Box 916

56 Mont Vernon Street

Milford, NH 03055

Phone: (603) 672-1002 Fax: (603) 732-5103

www.svbgc.org

Volunteer Application

Date of Application _____ Male _____ Female _____

Name _____ Age _____ School _____

Address _____ Grade _____

City/State/Zip _____ Phone Number _____

Level of Education completed _____ Occupation _____

Emergency Contact Person _____ Relationship _____

Why are you interested in volunteering for our organization?

Do you have any youth volunteering experience? YES NO

What times are you available for volunteering? (Circle or check all that apply)

Early Morning (6:45 – 9 am)

Day (9 am – 4 pm)

Evening (4 – 6:30 pm)

Night (6:30 - 12)

Other _____

Weekdays

Weekends

What type of volunteer work are you interested in? (circle all that apply)

HOMework HELP	MAINTENANCE	COACHING	THEATER
FUNDRAISERS	TUTORING	ENRICHMENT/LESSONS	COMMUNITY SERVICE
BUS MONITOR	SPORTS	GENERAL PLAY	ADMINISTRATIVE
YARD WORK	TEENS	OTHER _____	

Do you have any specialized skills/training we could utilize at the Club (ex. Carpentry, Bilingual)?

Please list at least two references (not related to you) that have knowledge of your character, experience and ability.

Name: _____ Phone: _____ Relationship _____

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A criminal record check will be conducted. Please indicate any charges or convictions that the club should be aware of.

I authorize investigation of all statements herein and release the Boys & Girls Club of Souhegan Valley and all others from liability in connection with the same. I understand that, if volunteering, I will be considered at-will and all of my volunteer services shall be donated, and that any agreement to the contrary must be in writing and signed by the Executive Director. I also understand that untrue, misleading, or omitted information herein may result in dismissal of my duties regardless of the time of discovery.

Signature of volunteer applicant: _____ **Date:** _____

If under 16 years of age, please have a parent or guardian sign below as acknowledgement:

Signature of parent/ guardian: _____ Date: _____