



VOLUNTEER

YMCA OF YOUNGSTOWN • Strengthening the Foundations of Community

Name _____ Date _____

Address _____

City _____ State _____ Zip _____

Phone _____ DOB _____ E-Mail _____

Please check which branch where you would like to volunteer:

- Davis Family YMCA Central YMCA

I would like to volunteer with the following age groups: (Check all that apply)

- Active Older Adults (65 & up) Adults (18 & up) Teens (13-18)
 Preschool 3-5 yrs) Youth (6-12 yrs)

PROGRAM INTERESTS

- Aquatics Special Events
 Arts & Humanities Summer Camps
 Races Youth Sports
 Preschool Other _____

I want to share my skills, experience and/or training in:

- Data Entry Journalism/Story Telling Photography/Videography
 Fund Raising Leading Groups of People Security
 Giving Presentations Marketing/Social Media Skilled Trades
 Hospitality (greeter, tours, people management) Website Development
 Other _____

I am generally available to volunteer during the following days: (check all that apply)

- Sunday Monday Tuesday Wednesday Thursday Friday Saturday

Please return this application to the Service Desk

DAVIS FAMILY YMCA
45 McClurg Rd • Boardman, OH 44512
330-480-5656

CENTRAL YMCA
17 N. Champion St • Youngstown, OH 44501
330-744-8411

YoungstownYMCA.org