



Wood River Community YMCA  
PO Box 6801 Ketchum, ID 83340  
Phone (208) 727-9622  
Fax (208) 726-1524  
[www.woodriverymca.org](http://www.woodriverymca.org)

## Student Volunteer Information Packet

Thank you for inquiring about volunteering here at the Wood River Community YMCA. Each year volunteers play a vital role in our mission to *“develop meaningful relationships and make a lasting impact in the Wood River Valley.”*

We currently have a wide-variety of positions available, involving a number of departments at the Wood River Y. Your service at the Y will help bolster our efforts in becoming an integral part of the community at-large!

### To Get Started:

1. Complete the enclosed application and return it to the Volunteer Coordinator.
2. Complete the top portion of the two enclosed reference forms and give them to individuals who have known you for at least one year, and are not an immediate family member. They can return the forms in the attached envelopes to the front desk of the Y when completed.

Once we receive your application and references, we will move forward with running a criminal background and child abuse clearance. The final step will be to connect you with the department you would like to work with, and talk about the details of the position with them.

Please don't hesitate to contact us if you have questions or would like to schedule a tour of our facilities.

Thank you for considering partnering with us!

**Mary Simms- Volunteer Coordinator**  
**(208) 928-6710**  
**[msimms@woodriverymca.org](mailto:msimms@woodriverymca.org)**



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## Student Volunteer Application

**INSTRUCTIONS:** Thank you for your interest in volunteering with the Wood River Community YMCA. Your talents and commitments to our mission are what make the YMCA a great place. Remember that all volunteer applicants, ages 18 years and older, must agree to a criminal background check and be fingerprinted according to state law and YMCA policy.

### PERSONAL INFORMATION

Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_

Are you at least 18 years of age?  Yes  No (If no, please have your parent or guardian sign the application).

Are you a YMCA member?  Yes  No

Have you ever volunteered for the YMCA before?  Yes  No

If yes, date and program last volunteered for: \_\_\_\_\_

Have you ever been convicted of or plead guilty to any criminal offense?  Yes  No  
(If yes, please attach a full description).

### AREAS OF VOLUNTEER INTEREST

- |   |   |
|---|---|
| <input type="checkbox"/> Administration           | <input type="checkbox"/> Child Watch    |
| <input type="checkbox"/> Aquatics                 | <input type="checkbox"/> Climbing Wall  |
| <input type="checkbox"/> Fitness Floor            | <input type="checkbox"/> Marketing      |
| <input type="checkbox"/> Group Exercise           | <input type="checkbox"/> Fundraising    |
| <input type="checkbox"/> Membership/Welcome Desk  | <input type="checkbox"/> Special Events |
| <input type="checkbox"/> Kids Club/Youth Programs | <input type="checkbox"/> Other: _____   |

### AVAILABILITY

Monday times: \_\_\_\_\_

Friday times: \_\_\_\_\_

Tuesday times: \_\_\_\_\_

Saturday times: \_\_\_\_\_

Wednesday times: \_\_\_\_\_

Sunday times: \_\_\_\_\_

Thursday times: \_\_\_\_\_

### EMERGENCY CONTACT INFORMATION

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_



## **Mandatory Risk Waiver and Volunteer Understanding**

The Wood River Community YMCA provides various activities to the public. YMCA participants understand that these activities do involve inherent risks which are beyond the control of the Wood River Community YMCA and its' staff, volunteers, and members. We, the undersigned, do understand that upon using the facility and/or services, that we hereby assume all risks for the behavior, actions, and safety of myself and my minor child while involved in the activities. Therefore, I assume full responsibility for personal injury to myself and/or to members of my family, and for loss or damage to my personal property and expenses thereof as a result of my negligence or the negligence of my family participating in said activities. I have read and understand this agreement and release of liability, and do voluntarily agree to sign. I also understand that I can be denied access to the YMCA if my account is not current. I understand that to enter the YMCA on each visit, I will need to provide the proper identification. I also give the YMCA permission to utilize pictures of myself and/or my family in YMCA marketing, promotions, and print media.

## **Code of Conduct**

Using the mission and principles of character development as a guide, the following Code of Conduct is to ensure that all who enter our facility enjoy a safe, welcoming and comfortable environment. Individuals are expected to act in a manner that upholds these principles at all times when in our facility or participating in YMCA programs. We expect those using the YMCA to behave in a way that shows respect and caring for others of all ages, including YMCA employees. This includes not using any language or engaging in any action that can hurt or frighten another person, or that falls below an accepted standard of conduct. Specifically, when at the YMCA or participating in a YMCA program, actions that do not show respect for others and are not permitted include:

- Wearing inappropriate attire. This includes wearing swimsuits only in the pool area and shoes, shorts, and shirt or leotard in other areas of the facility. Clothing with vulgar or profane writing or pictures is not allowed.
- Using angry or vulgar language (includes swearing, name calling or shouting).
- Making physical contact with another person in any angry or threatening manner.
- Engaging in inappropriate behavior, sexual or otherwise.
- Harassing or intimidating by words, gestures, body language or any other menacing behavior.
- Stealing or other behavior that results in the destruction or loss of property.
- Carrying or concealing any weapons, devices or objects that may be used as weapons.
- Using or possessing illegal drugs or alcohol on YMCA property, in YMCA vehicles, or at YMCA sponsored programs
- Loitering.
- Any other conduct of an inappropriate, threatening, or offensive nature.

Members and guests are encouraged to be responsible for their personal comfort and safety, and ask any person whose behavior threatened their comfort to refrain from doing so. If a member or guest feels uncomfortable confronting the person directly, they should report the behavior to staff when asked. Management staff will investigate all reported incidents. Suspension or termination of YMCA membership privileges may result from a determination by the YMCA that a violation of the Code of Conduct has occurred. The YMCA reserves the right to refuse service to anyone who does not adhere to the values and mission of the YMCA.

I have read and agree to the "Mandatory Risk Waiver and Member Understanding" and the "Code of Conduct". I further agree to abide by the Membership Policy Handbook available for download at [www.woodriverymca.org](http://www.woodriverymca.org).

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Student Signature

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Date

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Parent or Guardian Signature *(if applicant under age 18)*

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Date



## Volunteer Reference Form

### Volunteer Applicant:

Please print your name and address below and give this form to a **reference that has known you for at least one year and is not a relative**. Appropriate references could include a teacher, an employer, a coach or mentor, a religious teacher, a co-worker, a personal friend, etc.

Name of Applicant:
Address:
Phone Number:
Email:
Volunteer Position Applying For:

I \_\_\_\_\_ have applied for a volunteer position at The Wood River Community YMCA, and have given your name as a personal/professional reference. I give permission for the release of the reference information to The Wood River Community YMCA.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Referring Party:

*The person named above is applying for a volunteer position at The Wood River Community YMCA. We are a non-profit organization that seeks to allow community members to make a lasting impact in the Wood River Valley. References are an important part of the application process because volunteers are considered partners in our mission. Your honest input is essential to the selection process. This reference is confidential and will become part of the individual's file with us. Thank you very much for your time and assistance.*

Name of Reference:
Address:
City/State/Zip:
Phone Number:
Email:

1. How long have you known the applicant?
2. In what capacity have you known the applicant?
3. What do you consider to be the applicant's strengths and how have they been demonstrated?
4. In what areas do you feel the applicant needs improvement?
5. Would you recommend that the applicant volunteer at the YMCA? (circle one) Y N
6. If yes, are there any suggested areas or tasks you would recommend? If No, please explain why.
7. Please evaluate the applicant in the following areas using the scale where 1=poor 5=excellent. <input type="checkbox"/> Honesty <input type="checkbox"/> Ability to work as a team <input type="checkbox"/> Communication effectiveness <input type="checkbox"/> Dependability <input type="checkbox"/> Flexibility
8. Is there anything else you would like to add?

Reference Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please complete this form and return it within one week in a sealed envelope to the Wood River Community YMCA (PO Box 6801 Ketchum, ID 83340). Please contact the Volunteer Coordinator **Aaron Pittman** at **(208) 727-9622 Ext. 110** or **apittman@woodriverymca.org** if you have questions about this form or need further information about our Volunteer Program. Thank you for your reference!



## Volunteer Reference Form

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*Please print your name and address below and give this form to a reference that has known you for at least one year and is not a relative. Appropriate references could include a teacher, an employer, a coach or mentor, a religious teacher, a co-worker, a personal friend, etc.*

Name of Applicant:
Address:
Phone Number:
Email:
Volunteer Position Applying For:

I \_\_\_\_\_ have applied for a volunteer position at The Wood River Community YMCA and have given your name as a personal/professional reference. I give permission for the release of the reference information to The Wood River Community YMCA.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Referring Party:

*The person named above is applying for a volunteer position at The Wood River Community YMCA. We are a non-profit organization that seeks to build strong kids, strong families and a strong community through programs that develop the whole person in spirit, mind and body. References are an important part of the application process because volunteers are considered partners in our mission. Your honest input is essential to the selection process. This reference is confidential and will become part of the individual's file with us. Thank you very much for your time and assistance.*

Name of Reference:
Address:
City/State/Zip:
Phone Number:
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1. How long have you known applicant?
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9. Is there anything else you would like to add?

Reference Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please complete this form and return it within one week in a sealed envelope to the Wood River Community YMCA (PO Box 6801 Ketchum, ID 83340). Please contact the Volunteer Coordinator Debbie Hollinger at (208)928-6704 or [debbie@woodriverymca.org](mailto:debbie@woodriverymca.org) if you have questions about this form or need further information about our Volunteer Program. Thank you for your assistance!