



BOYS & GIRLS CLUBS
OF SOUTHERN MAINE

VOLUNTEER APPLICATION FORM

Applicant Information

Full Name: _____ DOB: _____

Address: _____ City/State/Zip: _____

Phone Number: _____ Email Address: _____

T-Shirt Size: _____ Organization Affiliation (if applicable): _____

Volunteer Interests: Food/M Meal Prep Art STEM Physical Ed/Gym

Special Skill: (ie photography, music, etc.): _____

Other: _____

Club Location: Portland South Portland Auburn Lewiston

Day(s) of the week Available: Mon Tues Weds Thurs Fri Time: 3:30-5:30 4p-6p

**Food/M Meal Prep Times may be earlier in the day*

Emergency Contact Information

- Full Name: _____ Relationship to You: _____
- Phone Number: _____

Background & Waiver Acknowledgment

- Have you ever been convicted of a felony or offense involving a minor?
☐ No ☐ Yes (please explain): _____
- Do you have any physical limitations or allergies we should be aware of?
☐ No ☐ Yes (please specify): _____

By signing below, I affirm that the information provided is true to the best of my knowledge. I understand that I am volunteering at my own risk and agree to follow all the rules and staff directions while on site. I grant Boys & Girls Clubs of Southern Maine permission to seek medical attention on my behalf in case of emergency.

Signature: _____ Date: _____

If under 18, Parent/Guardian Signature Required

Parent/Guardian Signature: _____ Date: _____