BOYS & GIRLS CLUBS
OF CENTRAL WYOMING

Office Use Only	
VP:	Date:
☐ Eligible	☐ Ineligible

Volunteer Application

Name:	**Application Date:**
I am volunteering as: ☐ An Individual ☐ A member of an organization/company Organization/company name: _____.	**My volunteer term will be:** ☐ Short term (no longer than a month) ☐ Long term (2 months or longer) ☐ Other: _____
My time frequency will be: ☐ 1 time only ☐ 1-2 times only ☐ 1 time per week ☐ 5 or more times per month ☐ Other: _____	

Volunteer Information

Birthdate (mm/dd/yy):	**Phone:** **Email:** **I prefer to be contacted via:** ☐ Phone ☐ Text ☐ Email	
Physical Address: **City:** **State:** **Zip:**	**Mailing Address:** **City:** **State:** **Zip:**	
Employer:	**Job Title:**	
If student, name of school:	***Gender:**	***Race:**
	*For demographic tracking purposes only; BGCCW does not discriminate on the basis of sex, race, color, religion, citizenship, age, disability or national origin	

Emergency Contact

Name:	**Relationship to Volunteer:**	**Phone Number:**

Volunteer Preferences

How did you learn about the Boys & Girls Clubs of Central Wyoming:	**List any previous volunteer experience:**

Interests and Special Skills (check all that apply):

☐ Education
☐ Health & Wellness
☐ Sports/Coaching
☐ Leadership Development
☐ Mentoring
☐ Club Facility Maintenance
☐ Arts & Culture
☐ Special Skills _____

Are you bilingual? ☐ Yes ☐ No If YES, what language _____	**Are you interested in helping with special events (i.e. fundraisers, over-nighters, outreach, etc.)?** ☐ Yes ☐ No

Preferred Club (please indicate your preferred location):

☐ Greater Casper (Main) Branch
☐ Glenrock Branch
☐ Paradise Valley Branch
☐ Lincoln Branch
☐ Big Horns (Buffalo)
☐ Main Branch (Teen Center)
☐ Journey Branch
☐ Verda James Branch
☐ Dean Morgan Branch
☐ Big Horns (Kaycee)

Signature of Applicant: _____ Date: _____

Signature of Parent or Guardian: _____ Date: _____

If Applicant is Under 18 Years Old: I represent and warrant that I am the parent or guardian of the above minor and have full legal authority to execute this application.

Please return this application to:

Boys & Girls Clubs of Central Wyoming
1701 E. K Street
Casper, WY 82601
Phone: 307-265-2427
Fax: 307-234-2511

_____
Volunteer's Phone Number

VOLUNTEER
CRIMINAL RECORD RELEASE AUTHORIZATION FORM
(All information must be provided)

1. Name: _____
Last (Maiden) First Middle Initial

2. Address: _____
House# Street City/Town State Zip Code

3. Date of Birth: _____ Hair Color: _____ Eye Color: _____

4. Drivers License Number_____ State of Issuance: _____

5. Social Security Number: _____

SECTION II

I hereby give my permission to the Boys & Girls Clubs of Central Wyoming (BGCCW) to obtain information relating to my criminal history record through a third party investigation agency or other agency contracted with BGCCW. The Criminal History Record, as received from the agency, may include local, state, national, or international arrest and conviction data as well as plea bargains and deferred adjudications. I understand that the information will be used, in part, to determine my eligibility to serve as a volunteer or employee of BGCCW. I also understand that as long as I remain as a volunteer or employee of BGCCW, the Criminal History Records check may be repeated at any time.

I hereby release and agree to indemnify BGCCW/third party requesting agency or other reporting agency and hold its agents harmless from and against any and all liability, expense (including court costs and attorneys' fees) and claims for damage of any nature whatsoever resulting from the investigation of my background in connection with y application to become a volunteer or employee of BGCCW.

By signing below you are certifying that you are the individual listed above and that the information provided is true.

YOUR SIGNATURE: _____ DATE: _____

STATE OF WYOMING)
) SS.
COUNTY OF _____)

The above and foregoing was subscribed and sworn to before me by _____ this _____day of_____, 20____. Witness my hand and official seal.

_____
Notary Public

My Commission Expires: