

Rebound Child & Youth Services Inc.
700 D'Arcy Street North, Unit 20, Cobourg ON K9A 5T3 (905) 372-0007

VOLUNTEER APPLICATION

How did you hear about volunteering with Rebound? _____

Preference of Volunteer Involvement: (please check all that are of interest)

- | | |
|---|--|
| _____ CHOICES (life-skills program) | _____ I Shine/Be You (self-esteem programs) |
| _____ READbound (tutoring program) | _____ Beyond Books (literacy program) |
| _____ On-TRAC (anger awareness program) | _____ Fund Development |
| _____ Board of Directors | _____ Guitar Teacher (Assistant) |
| _____ Special Events/Other | _____ Reception/Administration/Program Preparation |
| _____ Rebound Committees—e.g. Red Run Committee | _____ Other |

NAME: _____
Last First Initial Mr. Mrs. Miss Ms.

HOME ADDRESS: _____
Apt. / House Number Street

Town/City Postal Code Email

PHONE: _____ When is the best time to call? _____

CELL: _____ BIRTHDAY: _____
Month Day Year
(Optional if over 18)

PLACE OF BUSINESS/SCHOOL (If Applicable): _____

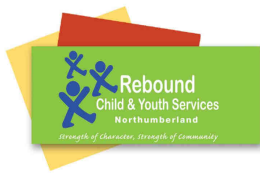
PHONE: _____ Can we call you at work? Yes _____ No _____

IN CASE OF EMERGENCY, PLEASE NOTIFY:

Name: _____ Phone: _____

Relationship: (i.e. spouse, mother, etc.) _____

Do you have any medical conditions, allergies or limitations we should know about? _____



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Please list your current & past volunteer experiences & employment positions, (include resume if desired). Please include personal passions, interests & hobbies.

Would you be willing to mentor /share your passions/talents with a youth? Yes _____ **or** No _____

PLEASE PROVIDE 3 PERSONAL &/or PROFESSIONAL REFERENCES: (Please notify references)

Name: _____ Phone: _____ Email: _____

Name: _____ Phone: _____ Email: _____

Name: _____ Phone: _____ Email: _____

I, _____ am applying for a volunteer position with *Rebound Child & Youth Services Inc.* ("*Rebound*") and hereby authorize *Rebound* to contact the above individuals for the purpose of obtaining a reference in connection with my volunteer application with *Rebound*.

I also understand that the information received from the references will be held in confidence by *Rebound*.

I further acknowledge that *Rebound* is under no obligation to accept my volunteer application and reserves the right to reject my application without supplying reasons therefore. I also acknowledge that my file becomes the property of *Rebound*.

Applicant Signature Date

I acknowledge and understand that this is an application to become a volunteer with Rebound Child & Youth Services Inc. I understand there will be no financial compensation, and that attendance and work performed by the volunteer with Rebound, will be at the sole risk and expense of the volunteer. I give permission for Rebound to make inquiries of others, which may include a criminal background check.

Applicant Signature Date

Rebound Staff Signature Date

All personal information given to Rebound Child & Youth Services Inc. (contact information email addresses, etc.) is used solely for Rebound Child & Youth Services Inc. ("*Rebound*") and will not be sold, traded or given to any unrelated third parties. Rebound sincerely appreciates your interest and support and respects your privacy. August 30, 2013