

**Berks County Chapter
American Red Cross
701 Centre Avenue, Reading, PA 19601-2599
(610) 375-4383**

YOUTH VOLUNTEER APPLICATION

Date _____

Name _____
Last First MI

Address _____

City _____ Zip Code _____

Telephone _____ Date of Birth _____ Age _____

School _____ Grade _____

E-mail _____

Name of Parent/Guardian _____
Last First

List activities you like to do and things you are good at doing:

What clubs/organizations do you belong to in school, church, etc.?

What activities did you participate in with your club/organization?

-over-

When would you like to volunteer? (Circle days and times you can help)

Weekdays: Monday Tuesday Wednesday Thursday Friday
morning afternoon after school evening

Weekends: Saturday Sunday
morning afternoon

List first, second and third choice for volunteer placement:
(Service Action Corps, help at Chapter, Health and Safety Education for Children, Disaster Services, Newsletter, Recruitment, Volunteers In Training, Meals on Wheels, other)

1 _____

2 _____

3 _____

This information is optional:

Gender (circle): Male Female

Racial/Ethnic Background:

_____ Black/African American

_____ White

_____ Native American/Alaska Native

_____ Latino/a

_____ Asian

_____ Native Hawaiian/Pacific Islander

_____ Other/Not Applicable

For Office Use Only:

Eff. Date _____

Job Code _____ Title _____

Type: Registered Reg. for Credit Reg. School Credit Other