



FOR YOUTH DEVELOPMENT®  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY

# YMCA LEADERS CLUB APPLICATION FOR MEMBERSHIP

Name \_\_\_\_\_

Cell # \_\_\_\_\_ Home Phone # \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_ Sex M or F or Other \_\_\_\_\_

Date of Birth \_\_\_\_\_ School \_\_\_\_\_

E-mail Address \_\_\_\_\_

Parents or Guardians Name \_\_\_\_\_

Parents/Guardians Email Address \_\_\_\_\_

Parents or Guardians Work# \_\_\_\_\_ Cell # \_\_\_\_\_

Please list the extra-curricular activities you are currently involved in with your school or church. (Include time involved weekly and also outside employment if applicable.)

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Please list any YMCA experience you have had over the years. (This could include employment, program participation, or sports.)

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## Qualifying Questions

1. Why do you want to be in Leaders Club?

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2. As a teen serving in a leadership role, what obligations to the YMCA staff do you believe would be the most important? What are some characteristics of a leader?

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3. After carefully reviewing your schedule, can you commit to 80% of Leaders Club events? (This would include Monday night meetings, weekend service projects and trips, etc.)

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Please indicate with a check the activities you would be interested in volunteering in.

Aquatics       Youth Programs       The Gym  
 Fitness       Child Care       Sports

References (Other than family members, you are allowed to use YMCA staff members)

1) Name: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Relation: \_\_\_\_\_

2) Name: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Relation: \_\_\_\_\_

**Please return this application to Jakayse Monroe by Monday, August 26th, 2024. You may also choose to bring it to the induction ceremony on Monday, September 9th or you can leave it at the front desk of the Martinsville-Henry County Family YMCA.**

**MISSION STATEMENT:**

**To put Christian principles into practice through programs that build healthy spirit, mind and body for all.**