



**Thank you for joining the Youth Volunteer Corps!
Please complete this Registration and Agreement.**



Last Name: _____ **First Name:** _____

Address: _____

City: _____ **State:** _____ **Zip Code:** _____

E-mail Address: _____ **Phone #:** (____) _____

Male/Female: _____ **Birth date:** ____/____/____ **Ethnicity (optional):** _____

School: _____ **Grade:** _____ **Anticipated Graduation Year:** _____

Parent/Guardian Name(s): _____

Parent/Guardian Phone #: (____) _____ **Cell #:** (____) _____

How did you hear about YVC? _____

Please rank your top three project categories out of the following list: Environment, Special Needs Individuals, Poverty, Children/Mentoring, Tutoring/Literacy, Animals, Arts, Peer Education, Eldery Individuals, Other (please specify).

First Choice: _____

Second Choice: _____

Third Choice: _____

Are there any special considerations you need to tell us about? (allergies, phobias, things you can't do or have a hard time doing that may affect your ability to participate without special consideration?) If so, what are they? (We keep your answers confidential. They just allow us to make sure you have the best experience possible!) _____

Youth Agreement Received: ____/____/____