



# V OLUNTEER FORM

Please complete this application form, if you are interested in becoming a Youth Empowering Society volunteer.

## Contact Information

First name: \_\_\_\_\_ Last name: \_\_\_\_\_  
Street \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Home phone: \_\_\_\_\_ Work phone: \_\_\_\_\_  
Date of birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Ethnicity: \_\_\_\_\_ Gender: M F

## Skills & Interests:

Please list any other special skills or interests

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I would like to serve up to: \_\_\_\_\_ hours:

## Emergency Contact

In the event of an emergency, whom should we notify?

First name: \_\_\_\_\_ Last name: \_\_\_\_\_  
Home phone: \_\_\_\_\_ Work phone: \_\_\_\_\_ Relationship: \_\_\_\_\_

## E-Mail

We keep volunteers informed by email,

Email address: \_\_\_\_\_

## Mail or E-Mail Completed Form

Address:

Youth Empowering Society  
El Simpson  
Executive Director  
855 W. Victoria St., Suite E  
Rancho Dominguez, CA 90220

Phone: (888) 295-1911

Email: [elsimpson@youthempoweringsociety.org](mailto:elsimpson@youthempoweringsociety.org)