



IVY Application

Involved Volunteer Youth

Name _____ Birthdate _____ Age _____

Address _____

Phone Number _____ Email _____

Year in School _____ School Attending _____

Sports Involved with _____ Season sport in session _____

Current Employment (if any) _____

Have you ever volunteered before? Yes _____ No _____ If so, where? _____

List any special interests you have that may help place you in a suitable volunteer position?

How often would you like to volunteer?

On-call basis _____ Once a month _____ Once a week _____ Regular basis _____

Do you have reliable transportation? Yes _____ No _____

What day of the week would best suit your schedule? M. T. W. Th. F. Sat. Sun.

Please list any organizations or clubs you are currently involved with _____

How did you learn about us? Friend, Relative, School or Website, if other please specify

Other: _____

List at least **one** family member or friend who may also be interested in volunteering

OVER

Name of Parent or Legal Guardian: _____

Address: _____

Telephone: Home _____ Work _____ Cell _____

Name of Physician: _____ Telephone: _____

Address: _____

Present Medications: _____

Known Allergies: _____

Emergency name(s) and number(s) other than parents:

Parental Emergency Medical Consent

This form gives permission for medical care in parental absence and must be presented upon permission for treatment. Every effort will be made to notify the parent or guardian immediately in case of emergency.

In the event that my child, _____, requires medical or surgical care while I am unable to be reached, I hereby give my consent to GRADE A PLUS staff to seek necessary treatment for my child. I agree to pay all costs and fees contingent on any emergency medical care or treatment for my child as secured or authorized under this consent.

Also, my signature below gives my permission for my child's picture and/or name to be included in literature or video for the promotion of IVY and/or GRADE A PLUS.

Signature of parent or guardian: _____

For more information go to

Website; www.gradeaplus.com

E-mail; GAP@gradeaplus.com