



Youth Volunteer Application

Please Check One: Torch (6th – 8th grade) _____ Keystone (9th – 12th grade) _____ Youth Volunteer _____

Please print clearly in ink:

Name: _____ Date: _____

Address: _____ City: _____ Zip: _____

Telephone: _____ Date of Birth: _____

Member Email Address: _____

Parent Email Address: _____

School: _____ Grade: _____

School Activities: _____

Were you an active Club Volunteer last year? Yes: _____ No: _____

List leadership positions and /or service projects you are active in: _____

Why are you interested in becoming a Torch/Keystone member or youth volunteer? _____

Would you be available for monthly meetings? Yes: _____ No: _____

What goals do you wish to accomplish volunteering at the Club? _____

What do you feel you can add as a volunteer? _____

What do you hope to gain from being a volunteer? _____

What improvements do you feel can be made in the Oyster Bay and East Norwich communities by our volunteers? _____

I solemnly subscribe to the purpose and objective of the Torch/Keystone/Youth Volunteer program and pledge my active support to its program of service and citizenship to the best of my ability.

 Applicant's Signature

 Date