



# Youth Volunteer Agreement

Mail or drop off completed application **ALONG WITH** *copy of either Student ID or Driver's License* (if applicable) to  
*A Beautiful Me, 525 Court Street  
 Port Huron, MI 48060.*

Please Circle T-SHIRT SIZE (Free upon processing for youth only): **YOUTH**-size: **L** (10-12) **XL** (14-16) **ADULT**-size: **S M L XL**

Date \_\_\_\_\_

**Youth** First Name \_\_\_\_\_

**Youth** LAST Name \_\_\_\_\_

**Youth** Preferred First Name (**Nickname**) \_\_\_\_\_

**Youth** eMail Address \_\_\_\_\_

School Name \_\_\_\_\_

Grade \_\_\_\_\_ Date of Birth (MM/DD/YYYY) \_\_\_\_/\_\_\_\_/\_\_\_\_

Home Address \_\_\_\_\_

City \_\_\_\_\_ Zip Code \_\_\_\_\_ County \_\_\_\_\_

Home Phone (\_\_\_\_\_) \_\_\_\_\_ Emergency Cell Phone (\_\_\_\_\_) \_\_\_\_\_

Special needs or allergies? \_\_\_\_\_

**Parent** First Name \_\_\_\_\_

**Parent** LAST Name \_\_\_\_\_

**Parent** eMail Address \_\_\_\_\_

How did you hear about "A Beautiful Me" or "The Closet by A Beautiful Me"? \_\_\_\_\_

Please indicate your racial / ethnic group(s) for purposes of exploring grants/funding. Check all that may apply:

- White (non-Latino)  African American  Hispanic  Native American  Middle Eastern  Asian / Pacific Islander  Other

Primary Language \_\_\_\_\_

Do you live in a single parent household?  Yes  No

Secondary Language \_\_\_\_\_

Do you receive free & reduced lunch?  Yes  No

Have you ever been in Foster Care?  Yes  No

Employer (if applicable) \_\_\_\_\_

Job Title \_\_\_\_\_

Employer Address \_\_\_\_\_

City / Zip \_\_\_\_\_

Describe your job duties at work: \_\_\_\_\_

Please list other volunteer organizations or service groups in which you participate: \_\_\_\_\_

Please list your hobbies, skills, and interests: \_\_\_\_\_

What time of the day can you be involved?  Weekdays  Weeknights  Weekends

How would you describe yourself?  Introverted  Extroverted

How certain are you that you can fulfill your time commitment as a Volunteer?  Very Sure  Sure  Somewhat Sure  Unsure

References - List one school, work or personal reference we may contact. **Do not list family members.**

Name	Relationship to You	How long have you known this person?	Type of Reference (School, Work or Personal)	Phone

**Custodial Parent/Guardian:** *I certify that I am a custodial parent/guardian and give the aforementioned permission to volunteer with A Beautiful Me.*

Signature of Parent/Guardian: \_\_\_\_\_

PRINT Parent/Guardian Name: \_\_\_\_\_





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Volunteering with A Beautiful Me and at The Closet by A Beautiful Me is to be treated as a paid job. As a volunteer with A Beautiful Me, I understand:

... upon approval of the volunteer process, my parent and I will receive an eMail which includes a video orientation and more information. If interested in volunteering at The Closet in Port Huron, A Beautiful Me will determine a volunteer "work" shift with me. My parent's eMail will be added to the volunteer communication.

... when volunteering, I will arrive 10 minutes prior to my shift. Events and workshops usually require an A Beautiful Me t-shirt and are identified in our sign-up management system. When volunteering at The Closet, apparel includes business casual, such as: dress pants, khaki pants, skirts (past fingertip), sweaters, dresses, knit shirts or A Beautiful Me t-shirts. NO shorts or leggings are permitted at The Closet (leggings can be worn like tights ONLY under a skirt/dress that is past fingertip length).

... if I am sick, I am responsible for calling in for myself at least three hours prior to my shift. Illness must be without vomiting or temperature for 24 hours before returning to work. If I am going to be more than 5 minutes late, it is my responsibility to call to notify for any shift change necessities.

... that all information about customers will be kept confidential.

... at any A Beautiful Me functions, I will act at all times to support the vision of the organization. ABMe's vision is to foster self-worth in ALL women of ALL ages.

... my photo may be used for marketing purposes in newsletters, recruiting, displays, etc.

... if a letter of recommendation is needed for future purposes, the reference needs to be requested 2 weeks prior to due date and will be reflective of my volunteer "work".

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

*(Please choose one)* **PHOTO RELEASE FOR MINORS UNDER 18 YEARS OF AGE**

Opt-In. I hereby grant permission to "A Beautiful Me" and its employees/volunteers to photograph my dependent and use the photo only for self-promotional publication processes, whether electronic, print, digital or electronic publishing.

Photography Opt-Out. Crowd scenes where no single person is the dominant feature are exempt.

*(Optional)* **Monthly POSITIVE TEXT MESSAGES**

I hereby grant "A Beautiful Me" to send positive text messages to the above registrant. (You may opt-out at any time by simply sending an eMail to [karen@ABMe.us](mailto:karen@ABMe.us))

Please include my daughter. She is aware of this positive service. Her cell phone (\_\_\_\_\_) \_\_\_\_\_

Please include me in these same positive text messages. My cell phone (\_\_\_\_\_) \_\_\_\_\_

**INTERNAL USE ONLY:**

Copy of School ID or Driver's License