

Student Tutor Volunteer Registration Form

Young Leaders of Orange County (YLOC)

NAME:	Gender: M F
School :	Grade: Date of Birth:
Address:	
Have you ever been suspended or expelled from school? No _____ Yes _____ If yes, please explain;	
Cell Phone:	Home Phone:
Email Address:	
Father's Name:	Mother's Name:
Parent's Cell Phone:	Parent's email:
New Membership Fee: \$100 Yearly Renewal Fee: \$50	

- I, _____, hereby, desire to work as a volunteer for YLOC and participate in all activities related to being a YLOC volunteer. I certify that the information provided above is true and correct and have been given voluntarily.

Signature: _____ Date: _____

Print Name: _____

Parent/Legal Guardian

- By signing below, I am certifying that I have reviewed this form as well as the release and waiver of liability form. I consent to all of the above and authorize my child to become a YLOC volunteer.
 - I acknowledge that there will be duties (i.e. supervising a volunteer session, etc.) as parent of a YLOC volunteer in addition to the duties of my child as a YLOC volunteer.

Parent/Guardian Signature: _____ Date: _____

Print Name: _____