



## $\underline{\textbf{Mentor/Volunteer Application Form}} * \textbf{These fields must be completed}$

YMCA	香	港	基	督	教	青	年	會	A-LIFE ACAI
<b>人</b>	YM	ИСА	O	FH	ION	IG	KO:	NG	AFILIPA A CAL

For Office Use									
andled by:	Application No:								
☐ Acceptance	Date :								
Reject:									

*Personal Information:	Reject:
Name: (Chinese) (Eng	glish) Gender: $\square$ M $\square$ F
Age: ☐ under 24 ☐ 25-29 ☐ 30-39 ☐ 40-49 ☐ 50-59 ☐ abo	ve 60 Tel No.: (Mobile)
Correspondence address:	
Email:	
Education:	
☐ Postgraduate (Major:	Others:
☐ Undergraduate (Major:	)
Working Status:	
☐ Employed (Working Organization: Position:	)
Volunteering Service Experience: (You may select more than one item(s)	)
☐ Children ☐ Youth ☐ Family ☐ Elderly	Others:
Explain why you want to join this Project in approximately 50 words:	
Recommended by (if any):	
* Personal Information Collection Statement (Compulsory)	
voluntary. However, if you do not provide sufficient information, we may not be able to proaged under 18 should consult your parent before the supply of the personal information. Transfer of Personal Data  The personal data you provide will be made available to persons working in the YMCA or per the data may only be disclosed to the relevant parties in the circumstances listed below:  1	rsons designated on a need-to-know basis. Apart from this, claims, evaluation and review of services and other issues service/ assistance to you.  2. You have a right of access to and correction of personal atta will be erased after fulfilling the purposes of collection.  2. Sets or correct your personal data, please contact the YMCA.  2. When y personal data which would be used for processing my to class administration work), promotion, evaluation of a YMCA.  2. PMCA.  2. PMCA.  2. PMCA.  3. Set of child /youth under the age of 18.  4. Set of child /youth under the age of 18.  4. Set of the YMCA of Hong Kong ("YMCA") and otherwise yeelf and others. I understand that the YMCA assumes no nor from my participation in any of its activities, use of its y heirs that I assume the risk for any and all injuries and that that I may suffer as a result of participation in any of admage which I may suffer as a result of participation in
* Personal Information Collection Statement  I acknowledge that I have read and agree to the "Personal Information"	n Collection Statement"
Application's Signature: Parent/ Guardian's Sig	nature: Date:

Notes to Applicants: