



Volunteer Waiver, Release, and Confidentiality Agreement

Name: _____

Address: _____

Phone: _____ Email: _____

Emergency Contact Name/Phone #: _____

Waiver of Liability

The undersigned Volunteer has agreed to work as a Volunteer for Today's Harvest/Christian Cupboard Emergency Food Shelf (CCEFS). As a Volunteer I understand that some of the activities performed by Today's Harvest/CCEFS volunteers involve a risk of injury. As a Volunteer I hereby expressly release, relinquish, and forever discharge Today's Harvest/CCEFS and the respective successors and representatives (collectively, the "Released Parties") of and from any and all claims, which the undersigned may have against the Released Parties arising out of volunteer service for Today's Harvest/CCEFS and any and all related activities.

Media Release

You grant permission to Today's Harvest/CCEFS to use your name, photo, or other image or likeness (hereinafter referred to as "materials") for Today's Harvest/CCEFS' website, Facebook accounts, other social media, printed materials and/or press releases. You release Today's Harvest/CCEFS, its representative, employees, managers, members, officers, parent companies, subsidiaries, and directors, from all claims and demands arising out of or in connection with any use of said materials, including, without limitation, all claims for invasion of privacy, infringement of my right of publicity, defamation, and any other personal and/or property rights. You acknowledge and agree that no sums whatsoever will be due to you as a result of the use of said materials or any rights therein.

Confidentiality Agreement

Confidentiality is vital to the clients, volunteers, donors, and staff at Today's Harvest/CCEFS. You understand that in the course of volunteer work you may learn certain facts about clients, volunteers, and employees that are highly personal and confidential and you understand that all such information is completely confidential. You agree not to disclose any information regarding any person without specific consent of that individual to whom the information pertains. If there is any question regarding confidentiality, you will contact the supervisor to whom you report or the Executive Director.

Volunteer Signature

Date

*Signature of parent or guardian

Date

**If Volunteer is under 18 or considered a vulnerable adult, a parent/guardian signature is required.*