

WFP Volunteer Application

Name	Date
Address	
eMail	Cell Phone
Emergency Contact: In the even	t of an emergency, whom should we contact?
Name:	
Phone:	Relationship:
Volunteer Availability	
	-up for food distribution, helping distribute grocery helping with truck deliveries
	ing of donations, stocking pantry shelves with received -up for Thursday's packing.
Wed. 9:30–11:30: Outdoor r received donations, helping	receiving of donations, stocking pantry shelves with g with truck deliveries
donations (weather permit	or Monday's distribution, outdoor receiving of ting), stocking pantry shelves, stocking food that has reaking down of cardboard boxes.
General Information	
Do you have skills in these areas	that you would like to offer? Check those that apply.
Office/Clerical Social Me	edia Website Experience
Graphic Arts Carpentry	Grant Writing
Nutrition/Recipe Creation	Other
Do you own a pickup truck, SUV,	or van you could use for food pickup Yes
Do you have previous volunteer of	experience? If so what did you like to do most?
Do you have a vision of what a fo	ood pantry could become? (optional)
	issues of food security, agriculture, and climate are food pantry is just right.

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WFP Volunteer Agreement

Confidentiality & Release from Liability

As a volunteer for WFP, I understand that I may have access to sensitive information about the clients served which may include financial, medical, insurance, health, living situation and other sensitive and confidential records. I agree to keep all information confidential and will not disclose information pertaining to any client. Violations of this policy could result in civil liability for breaching a client's right to privacy. I acknowledge my obligation to respect the clients' privacy and the confidentiality of information pertaining to the client.

As a volunteer I am aware that my participation may require physical activity (i.e., standing, lifting, carrying grocery bags, unloading heavy food boxes food) that will require the use of reasonable caution to avoid injury. I am voluntarily participating in these activities with knowledge of the hazards and potential dangers involved and agree to accept any and all risks of personal injury and property damage.

By signing below, I agree to the following: I attest that I am physically fit and prepared for working as a volunteer. I hereby release, defend, and indemnify and hold harmless Westport Food Pantry and its affiliates, partners, and sponsors and their officers, directors, employees, representatives, and agents, from any and all claims for expenses, personal injury, losses or damages that may be incurred or caused by me during or in connection with my participating as a volunteer, whether arising from the negligence of such persons or otherwise. I understand that, when I am participating at the pantry, I will be under the supervision of Westport Food Pantry director, on-site manager or a volunteer manager. I also give Westport Food Pantry permission to seek emergency medical treatment on my behalf if I am injured or require medical treatment while participating at WFP.

Photo/Video Release from Liability

I hereby grant [], do not grant [] (check one) Westport Food Pantry permission to use my likeness in a photograph, video, or other digital media ("photo") in any and all of its publications, including web-based publications, without payment or other consideration.

My signature below certifies that I have carefully read the WFP Volunteer Handbook and this agreement and fully understand its contents. Furthermore, by signing this form I agree to the following:

- WFP may do a CORI check on me for the state of Massachusetts.
- A copy of WFP Volunteer Agreement will be placed in my personnel file.
- I am preforming a volunteer service and do not expect compensation of any kind.
- Volunteering is an at-will relationship with WFP, with the understanding it will continue to exist until they, the WFP, or both parties desire to terminate the volunteer relationship.
- This agreement shall be governed by Massachusetts law.

Print Name:		
Sign Name:		Date:
	To be signed at orientation.	