**Please Print:**

 **Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **Mailing Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_\_ Zip Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **Phone: ( ) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **ORGANIZATION NAME (if applicable): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **Minor's Name (if applicable): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

□ YES, I would like to be on your mailing list. □ NO, I prefer not to be on your mailing list**.**

 **Emergency Contact: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Community Food Bank(CFB) is a non-profit organization dedicated to the collection and distribution of food to those in need. I intend to assist CFB as a volunteer. Volunteer activities may include, but are not limited to food reclamation, sorting or distribution at CFB facilities or off-site activities such as assisting with pantry food distribution or programs. In consideration of participating as a volunteer and in recognition of the nonprofit status of CFB, I hereby agree as follows:**

**1. I hereby release Community Food Bank and its Board of Directors, officers, directors, or any of its owners, managers, employees, agents, subsidiary, or affiliated companies from, and waive on behalf of myself and my heirs and any minors indicated below, any and all causes of action, claims, demands, damages, costs, expenses and compensation for damage or loss to myself and/or property that may be caused by any act, or failure to act of CFB, its Board of Directors, officers, directors or any of its owners, managers, employees, agents, subsidiary or affiliated companies or that may otherwise arise in any way in connection with any voluntary activities with, or for CFB.**

**2. This Liability Waiver and Release extends to CFB together with all of its Board of Directors, officers, directors or any of its owners, managers, employees, agents, subsidiary or affiliated companies.**

**3. I assume the risk of any and all dangerous conditions in and about Community Food Ban facilities or in connection with any off-site voluntary activities.**

**4. IT IS MY INTENTION BY THIS LIABILITY WAIVER AND RELEASE TO EXEMPT Community Food Bank AND ALL OF ITS BOARD OF DIRECTORS, OFFICERS, DIRECTORS OR ANY OF ITS OWNERS, MANAGERS, EMPLOYEES, AGENTS, SUBSIDIARY OR AFFILIATED COMPANIES FROM ALL LIABILITY WHATSOEVER FOR PERSONAL INJURY, PROPERTY DAMAGE, AND WRONGFUL DEATH.**

**5. This waiver contains the entire agreement between myself and the parties released and their affiliates.**

**6. This waiver is also given on behalf of the following minor. (One document per minor, please.) (Note: A parent/guardian must sign if this waiver is for a minor.)**

**7. I give my consent for participating in any videos and photography that may be used by Community Food Bank in any publicity and/or social media. I release CFB from any liability in connection with the use of such materials.**

**8.** ***I have read this waiver, understand it, and am signing it voluntarily.***

***Signature:*** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ***Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

***Thank You for Volunteering with Community Food Bank!***

**Policies and Procedures**

**Please review and initial the following Community Food Bank policies and procedures. Please note that Community Food Bank reserves the right to revoke any volunteer hours should any of the general policies and procedures be violated.**



