

Thank you for volunteering with The Idaho Foodbank!

For more information about The Idaho Foodbank and volunteer opportunities please visit <http://idahofoodbank.org/give/volunteer>. Thank you for your volunteer action and support!

Waiver and Release of Liability

Name: _____ E-mail Address: _____
(First) (Last)

Phone: _____ Date of Birth: _____

Group (if any): _____

Emergency Contact

In case of emergency please contact: _____ Phone: _____

Relationship to emergency contact: _____

Policies and Procedures that I will follow:

- **All volunteers MUST wear closed-toe& closed-heel shoes when in the warehouse or while working in or around IFB equipment and trucks – boots, tennis shoes or running shoes work great!**
- No iPods or mp3 players while working in the warehouse or while working in or around IFB equipment & vehicles
- All jewelry, with the exception of wedding rings must be removed before working with food
- Wear appropriate attire for event and type of work.
- Wash your hands before and after handling food items.
- Running, horseplay, and stepping on pallets is a safety hazard and not permitted.
- Safety is first priority, please be mindful of the vehicles, using proper lifting techniques, and displaying mature behavior.
- Food and other products may not be removed from the warehouse or IFB buildings.
- Volunteers are responsible for cleaning up their area.
- Report all accidents and injuries immediately to IFB staff.
- The Idaho Foodbank will not be responsible for any missing personal belongings, please leave at home or in your car.
- Sexual harassment, violence, or offensive speech will not be tolerated.
- No one under the influence of drugs and/or alcohol will be permitted to volunteer.
- All volunteers must sign in immediately before volunteering begins.

Waiver and Release of Liability

In connection with my voluntary involvement in activities undertaken for, and / or with the participation and support of The Idaho Foodbank, I, the undersigned, hereby agree, for myself, my heirs, assigns, executors, and administrators to release and discharge The Idaho Foodbank and its nonprofit partner agencies, its officers and directors, members, partners, funders, employees, agents, and volunteers (Releasees) from all claims, demands, and actions from injuries sustained to my person and / or property as a result of my involvement in such activities, whether or not resulting from negligence. I agree to release and hold The Idaho Foodbank and its Releasees harmless from any cause or action, claims or suit arising there from. I hereby attest that my attendance and involvement in such activities is voluntary, that I am participating at my own risk and that I have read the foregoing terms and conditions of this release. I understand in the case of accident or injury that my health insurance is the primary insurance coverage. I hereby confirm, represent and warrant that I have never been **charged with or convicted of any crime involving or relating to child abuse or neglect, child pornography, child abduction, or any other violent offense, including kidnapping, domestic violence, rape or any sexual offense, or who have ever been ordered by a court to receive psychiatric or psychological treatment** in connection therewith. I agree that I will perform activities that I am comfortable performing and will follow all instructions. I also grant full permission for The Idaho Foodbank and their Releasees, to forever use photographs, videos, audios or quotations from me in legitimate accounts and promotion of The Idaho Foodbank activities, with or without identification of me by name, and without compensation. This includes The Idaho Foodbank's website, Facebook, Twitter, and other social media and media sources. In the course of volunteering at The Idaho Foodbank, I understand that I may work with confidential information. I hereby confirm that I have completed all necessary volunteer training, including, but not limited to, Civil Rights and Food Safety training. I hereby confirm that I have been background checked or have provided proof of a background check in the past three years. I agree to keep such information in the strictest confidence. I must abide by the volunteer policies and procedures outlined above.

Print Name: _____ Signature: _____ Date: _____