



## VOLUNTEER APPLICATION

<b>NAME:</b>	<b>LAST:</b>	<b>FIRST:</b>
<b>Please check one:</b>	<input type="checkbox"/> New Volunteer <b>OR</b> <input type="checkbox"/> Continuing Volunteer since _____ (year)	
<b>GROUP OR ORGANIZATION:</b>		
<b>PHONE:</b>	<b>DAY:</b>	<b>EVE:</b>
<b>EMAIL:</b>		
<b>ADDRESS:</b>		
<b>CITY, STATE, ZIP:</b>		
<b>BIRTHDATE:</b>		
<b>Please indicate which days / times you are available to volunteer:</b>	<b>Volunteer hours are Mondays through Fridays (from 9 am to 3 pm) and Saturdays (from 9 am to 12 pm)</b> <b>MORNING:</b> <input type="checkbox"/> MON <input type="checkbox"/> TUES <input type="checkbox"/> WED <input type="checkbox"/> THURS <input type="checkbox"/> FRI <input type="checkbox"/> SAT <b>AFTERNOON:</b> <input type="checkbox"/> MON <input type="checkbox"/> TUES <input type="checkbox"/> WED <input type="checkbox"/> THURS <input type="checkbox"/> FRI	
<b>Please indicate frequency of volunteering:</b>	<input type="checkbox"/> WEEKLY <input type="checkbox"/> EVERY OTHER WEEK <input type="checkbox"/> MONTHLY <input type="checkbox"/> REQUIRED STUDENT HOURS <input type="checkbox"/> ON CALL <input type="checkbox"/> OTHER: _____	
<b>Please indicate which volunteer areas you are interested in:</b>	<input type="checkbox"/> WAREHOUSE <input type="checkbox"/> CLOTHES CLOSET <input type="checkbox"/> FRONT DESK (receptionist duties, i.e., phones and filing) <input type="checkbox"/> LARGE DONATION PICK UP/DELIVERY (on call) <input type="checkbox"/> KIDS CAN FOOD DRIVE (Oct./Nov. each year) <input type="checkbox"/> SPECIAL EVENTS (i.e., Run 4 Hunger, Harvest of Hope Dinner, Pumpkin Patch, Harvest Festival) <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> OTHER: _____	
<b>Special Skills, Interests, Qualifications, or Physical Restrictions:</b>		
<b>Previous Volunteer Experience:</b>		
<b>Are you bilingual?</b>	<input type="checkbox"/> No <input type="checkbox"/> Yes If Yes, what language(s)? _____	
<b>Have you been convicted of a felony?</b>	<input type="checkbox"/> No <input type="checkbox"/> Yes	
<b>EMERGENCY CONTACTS:</b>	Name: _____ Phone: _____ Name: _____ Phone: _____	

**By completing this form, volunteer agrees that s/he has received and accepted the Volunteer Policies and Procedures.**  
 It is the policy of Elk Grove Food Bank Services to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability.  
 Thank you for your interest in volunteering with Elk Grove Food Bank Services.

# ELK GROVE FOOD BANK SERVICES

## WAIVER & RELEASE OF LIABILITY

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Day Phone: \_\_\_\_\_ Email: \_\_\_\_\_

This release and waiver of liability releases Elk Grove Food Bank Services, a non-profit organization existing under the laws of the State of California and each of its directors, officers, employees, and agents. The Volunteer desires to provide volunteer services for Elk Grove Food Bank Services.

1. Volunteer understands that the scope of Volunteer's relationship with Elk Grove Food Bank Services is limited to a volunteer position and that no compensation is expected in return for services provided by Volunteer; that Elk Grove Food Bank Services will not provide any benefits traditionally associated with employment to Volunteer; and that Volunteer is responsible for his/her own insurance coverage in the event of personal injury or illness as a result of Volunteer's services to Elk Grove Food Bank Services. Waiver and Release: I, the Volunteer, release and forever discharge and hold harmless Elk Grove Food Bank Services and its successors and assigns from any and all liability, claims, and demands of whatever kind or nature, either in law or in equity, which arise or may hereafter arise from the services I provide to Elk Grove Food Bank Services. I understand and acknowledge that this Release discharges Elk Grove Food Bank Services from any liability or claim that I may have against Elk Grove Food Bank Services with respect to bodily injury, personal injury, illness, death, or property damage that may result from the services I provide to Elk Grove Food Bank Services or occurring while I am providing volunteer services.
2. Insurance: Further I understand that Elk Grove Food Bank Services does not assume any responsibility for or obligation to provide me with financial or other assistance, including but not limited to medical, health or disability benefits or insurance of any nature in the event of my injury, illness, death or damage to my property. I expressly waive any such claim or compensation or liability on the part of Elk Grove Food Bank Services beyond what may be offered freely by Elk Grove Food Bank Services in the event of such injury or medical expenses incurred by me.
3. Medical Treatment: I hereby Release and forever discharge Elk Grove Food Bank Services from any claim whatsoever which arises or may hereafter arise on account of any first-aid treatment or other medical services rendered in connection with any emergency during my tenure as a volunteer with Elk Grove Food Bank Services.
4. Assumption of Risk: I understand that the services I provide to Elk Grove Food Bank Services may include activities that may be hazardous to me. As a volunteer, I hereby expressly assume the risk of injury or harm from these activities and release Elk Grove Food Bank Services from all liability for injury, illness, death or property damage resulting from the services I provide as a volunteer or occurring while I am providing volunteer services.
5. Photographic Release: I grant and convey to Elk Grove Food Bank Services all right, title and interests in any and all photographs, images, video, or audio recordings of me or my likeness or voice made by Elk Grove Food Bank Services in connection with my providing volunteer services to Elk Grove Food Bank Services.
6. Other: As a volunteer, I expressly agree that this Release is intended to be as broad and inclusive as permitted by the laws of the State of California and that this Release shall be governed by and interpreted in accordance with the laws of the State of California. I agree that in the event that any clause of provision of this Release is deemed invalid, the enforceability of the remaining provisions of this Release shall not be affected. I understand that this Release and Waiver of Liability will remain in effect until revoked in writing by me.

*By signing below, I express my understanding and intent to enter into this Release & Waiver of Liability willingly & voluntarily.*

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian Signature if under 18

\_\_\_\_\_  
Date

### FOR OFFICE USE ONLY

Contacted by: \_\_\_\_\_ Photo Release: Y or N Date Rec'd: \_\_\_\_\_

Handbook Acknowledgement: \_\_\_\_\_ Date of Orientation: \_\_\_\_\_ Date Confirmation Sent: \_\_\_\_\_



Elk Grove Food Bank Services  
9820 Dino Drive, Suite 140  
Elk Grove CA 95624  
916.685.8453  
www.elkgrovefoodbank.org

## **VOLUNTEER POLICIES AND PROCEDURES**

### ***Individuals wishing to volunteer at Elk Grove Food Bank Services must agree to the following policies and procedures:***

- 1 - All volunteers must complete and submit an official Elk Grove Food Bank Services (EGFBS) volunteer application form (available on our website and at the front desk) and agree to these policies and procedures prior to their first volunteer assignment.
- 2 - All volunteers must attend a Volunteer Orientation within the first 30 calendar days of volunteering.
- 3 - Volunteers must be at least 10 years of age. Volunteers between the ages of 10 and 15 must be accompanied by a parent or adult guardian at all times. Volunteers who are 16 or 17 years of age must have parent or guardian permission to do so.
- 4 - Only those volunteers who have completed the application process and are scheduled to work may be on site. Walk-in volunteers are not accepted. Volunteers may not bring guests or visitors with them (including children under the age of 10).
- 5 - Volunteers are required to wear closed-toe shoes when on site at all times and must dress appropriately. Please contact the Volunteer Coordinator with any questions regarding appropriate attire.
- 6 - Volunteers must park on the street (Dino Drive) when volunteering at the warehouse or in the office. Do not park in spaces reserved for other businesses in the business park complex.
- 7 - Volunteers are representatives of EGFBS and are expected to treat clients with compassion, sensitivity, and without judgment.
- 8 - Volunteers must hold the names and all information of EGFBS clients in the strictest of confidence. Failure to comply and inappropriate use of confidential information is grounds for immediate release.
- 9 - Volunteers may not take or remove any donated items from EGFBS facilities and may not receive any non-food items.
- 10 - Volunteers are required to record their volunteer time during each visit. This information is crucial to EGFBS and is used for mandatory statistical and financial reporting.
- 11 - EGFBS is committed to providing a comfortable and safe environment for all. Harassment of any kind, including on the basis of race, color, religion, gender, age, mental and/or physical disability, medical condition, national origin, marital status, sexual orientation, veteran status, or any other characteristic protected under federal or state law or local ordinance, will not be tolerated at EGFBS.
- 12 - Individuals who are currently receiving services from EGFBS, or have received services in the past 6 months, are not eligible to volunteer. Volunteers are not eligible to receive goods or services from EGFBS. Exceptions to this policy may be made at the discretion of the Executive Director.
- 13 - Food Bank employees who separate from employment at the Food Bank are not eligible to volunteer until three months after their separation. Exceptions to this policy may be made at the discretion of the Executive Director.

14 - In order to perform court-mandated community service hours, you must have a referral from Sacramento County's Alternative Sentencing Program (ASP). We do not accept court-mandated volunteering from other counties or states.

15 - Individuals with prior felonies (or criminal records involving violence, abuse, drugs, crimes against children, assault, or theft) may not volunteer at EGFBS. Exceptions to this policy may be made at the discretion of the Executive Director.

16 - Volunteers are to notify the appropriate Program Manager or Volunteer Coordinator if a change to their volunteer schedule is needed or if they wish to resign from volunteer service at EGFBS.

17 - Any questions or concerns regarding volunteer service should be addressed to the appropriate Program Manager. If a volunteer feels uncomfortable doing so, questions or concerns may be addressed to the Volunteer Coordinator. Questions will be answered and concerns will be investigated promptly. In the event a satisfactory or timely response is not received, volunteers may take their concerns to the Executive Director for resolution.

18 - Volunteers acknowledge that they are not acting as employees of EGFBS. Volunteers understand that they have no legal claims for minimum wages, overtime, premiums, underemployment, compensation, workers' compensation, liability, or other provisions of law for EGFBS employees.

19 - Volunteers may not engage with the media regarding EGFBS without prior consent. All inquiries must be directed to the Program Manager, Volunteer Coordinator, or other appropriate EGFBS staff member.

20 - EGFBS is not responsible for any lost or damaged items. EGFBS recommends leaving personal or valuable items at home when volunteering.

21 - Smoking and the use of tobacco products is prohibited in and on the premises of EGFBS facilities.

22 - Volunteers are asked to take a 15-minute rest period for every 4 hours of volunteer service. Volunteers working more than 4 hours are encouraged to take a 30-minute lunch break. Volunteers may use the small refrigerator to store food and beverage. It is recommended that the volunteer name be visible on any containers or food items.

23 - Volunteers are solely responsible for their safety and well-being while volunteering at the EGFBS or at any event related to EGFBS. In the event of an injury, the volunteer will hold harmless Elk Grove Food Bank Services, its administrators, directors, executors, and assigns. Volunteers agree to waive and release any and all rights and claims for damages, which included any injuries incurred by the volunteer en route to or from any facility or event of EGFBS.

24 - Volunteers accept personal responsibility for their actions and understand that failure to abide by these policies and procedures may result in termination of volunteer services.

25 - EGFBS reserves the right to refuse volunteer opportunities to any individual or group. EGFBS also reserves the right to reassign or terminate a volunteer assignment without cause.

Additional information is provided in the Volunteer Handbook and during the mandatory Volunteer Orientation. Please contact the Volunteer Coordinator at [Volunteer@egfbs.org](mailto:Volunteer@egfbs.org) or 916.685.8453 if you have any questions regarding these policies and procedures.

***Thank you again for your interest in volunteering at the  
Elk Grove Food Bank and serving our community!***



## Volunteer Photo Release

It is important to share the amazing work of our volunteers with supporters, potential volunteers, and prospective clients. Elk Grove Food Bank Services (EGFBS) uses photos and/or videos of volunteers and staff in publications, news releases, online, and in other communications related to the mission of EGFBS.

We ask that you agree to the following photo release guidelines. If you do not agree, you may still volunteer.

I hereby grant permission to Elk Grove Food Bank Services to use photographs and/or videos of volunteers in publications, news releases, online, and in other communications related to the mission of EGFBS and/or for the purpose of promotion or advertisement. I release EGFBS, its officers, directors, and employees from any and all liability arising from the use of a volunteer's name and/or photographic image. I understand that this agreement will remain in effect until such time as I revoke it in writing.

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Volunteer – PRINT NAME

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Volunteer – SIGNATURE

Date

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Parent / Guardian – SIGNATURE  
(for those volunteers under the age of 18)

Date

Parent/Guardian Name \_\_\_\_\_

Parent/Guardian Address \_\_\_\_\_

Phone (day) \_\_\_\_\_ (evening) \_\_\_\_\_

Email Address (optional) \_\_\_\_\_

**THANK YOU!**

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Volunteer Coordinator – SIGNATURE

Date