

Brice United Methodist Church Food Pantry Volunteer Form

I _____ agree to work as a volunteer for the Brice United Methodist Church Food Pantry. I understand that I will have access to certain 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, for any reason other than to serve the client as violations will result in civil liability for breaching a client’s rights to privacy. I acknowledge my obligation to respect the client’s privacy and the confidentiality of the information pertaining to the client.

As a volunteer I am aware that my participation may require physical activity (i.e. standing, lifting, and carrying up to 50 pounds) and will require the use of reasonable caution to avoid injury. I am voluntarily participating in this activity with knowledge of the hazards and potential dangers involved, and agree to accept any and all risks of personal injury and property damage.

I understand that the tools and materials provided by Brice United Methodist Church are and remain the property of Brice United Methodist Church, and I agree to return these tools and any remaining materials to Brice United Methodist Church at the end of my volunteer service.

I HAVE CAREFULLY READ THIS AGREEMENT AND FULLY UNDERSTAND ITS CONTENTS.

NAME _____

SIGNATURE _____

DATE _____