

West Alabama Food Bank aims to engage volunteers of all ages in hands-on experiences that directly support West Alabama Food Bank and our agencies. The following guidelines have been developed to enhance the safety of all volunteers while providing an opportunity to learn about food insecurity in West Alabama. It is our intent to provide a safe, productive, and rewarding experience for all volunteers.

- Wear sensible clothing and closed-toed shoes (no sandals) when working anywhere
 in the warehouse or at outside events.
- Immediately report any injuries and/or unsafe conditions or practices to a West Alabama Food Bank employee.
- Keep eyes and ears open at all times, watching & listening for forklifts, pallet jacks & other equipment used in the warehouse.
- NO headphones may be used at any time in the warehouse.
- NO cell phone usage in the warehouse unless specifically told to do so by a WAFB staff member.
- Absolutely NO HORSEPLAY allowed.
- Due to temperature in winter months, please wear layers if working in warehouse.
- Leave all valuables at home or lock them in your car or a locker provided by WAFB.
 WAFB is NOT responsible for lost or stolen items.
- Please ensure that you sign in and out on the Daily Sign-In Sheet located in the office, documenting the time in and out accurately and legibly. Failure to do so may lead to WAFB Staff being unable to provide official documentation of your hours.
- Any unauthorized removal of items is illegal. Do not remove items from the building for personal use, unless specifically told to do so by a West Alabama Food Bank Employee.
- Food: Snacks and/or drinks may be provided by WAFB. These items should not be taken out of the building.
- BEFORE you begin working you MUST complete the West Alabama Food Bank Volunteer Contact/Information Form. Acknowledgement of risk/ release and waiver of liability form must be signed by all volunteers. (Parent/Guardian must also sign if under the age of 18)

Tucker Brown

Volunteer Coordinator

volunteer@westalabamafoodbank.org

(205) 333-5353

WEST ALABAMA FOOD BANK VOLUNTEER CONTACT INFORMATION FORM

TODAY'S DATE:			
NAME OF GROUP (if applicable): _		
Name:			
Address:			
Phone number:			
Email address:			
EMERGENCY CONTACT: PHONE:			NE:
Program Volunteer	ing For:		
Volunteer	SLPro	Community Service	Second Chance
AVAILABILITY: MOI	NDAY THROUGH	I THURSDAY 8 AM – 4 PM FRIDA	AY 8 AM – 3 PM
kneeling, lifting and	I carrying. Place	work and manual labor, includin es at which I complete my volun od and other materials.	J J J
	<u>ACKNOWLE</u>	DGEMENT OF RISK AND RELEA	SE OF LIABILITY
This Acknowledgem		ease of Liability (release) is mad undersigned:	le this Day of
		ny services to West Alabama Fo rland Blvd ("WAFB")	od Bank, an Alabama non-profit
WHEREAS, I will	receive no comp	pensation for my service to WA	FB;
WHEREAS, I have WAFB office;	e read and unde	rstand the WAFB USDA Nondiso	crimination Statement posted in the
		l that my volunteer work will in ng, kneeling, lifting and carrying	clude hard work and manual labor, g;
•	pment, trucks ar	nd crates of food and other ma	plete my volunteer work may contain terials, which may result in an
WHEREAS, I am i	n good health a	nd physically able to perform v	olunteer services for WAFB.

NOW, THEREFORE, In consideration of the premises and terms hereafter set forth,

- 1. I hereby declare that I willingly assume these risks that might arise in my volunteer work for WAFB. I proceed voluntarily and of my own free will.
- I agree that while either being transported to a volunteer site or while providing volunteer
 work for WAFB, I will comply with all safety requirements of WAFB or of the property owner,
 should the volunteer site take place on any property other than property owned by WAFB
 and will remain aware and vigilant to avoid injury to myself, other volunteers, all persons at
 the volunteer site and all property.
- 3. I understand WAFB does not discriminate on the basis of race, color, religion, gender, gender expression, age, ancestry, disability, marital status, sexual orientation, or military status, in any of its activities or operations.
- 4. I understand WAFB is allowing me to participate in this volunteer work in reliance on the statements made in this Release and upon my voluntary waiver and release of WAFB, its, affiliates, employees, agents, administrators, successors and assigns, the right to sue for personal injury as described in this Release and acquit and discharge and hold harmless.
- 5. I do, for myself, my heirs, executors, administrators, successors, and assigns, release, waive any right to sue for personal injury, illness, death or property damage, or otherwise to hold liable WAFB, its affiliates, employees, agents, administrators, successors, and assigns and the owners of any property upon which volunteer executors, employees, administrators, successor and assigns, (released parties) for these risks. The released parties shall not be liable for any damage arising from personal injury, illness, death or property damage, sustained by the undersigned while being transported to or from or while providing volunteer services for WAFB or any other released parties, even in the event of negligence by released parties, whether such negligence is present at the signing of this release, or takes place in the future. This waiver does not, however, apply to gross negligence or intentional torts by released parties.

Printed Name	Parent/Guardian Printed Name**	
Signature	Signature**	
I grant full permission for WAFB to use performing volunteer work for any pur	any photographs, film, video or audio tapes of me pose WAFB deems appropriate.	
Yes (Initial)	No (Initial)	