



Volunteer Legal Disclosures and Waiver of Liability

Understanding of Benefits

I acknowledge that I have voluntarily agreed to participate in Inter-Faith Food Shuttle's volunteer program. I understand that the scope of my volunteer relationship with the Food Shuttle is limited to a volunteer position and that no compensation is expected in return for services provided by me; that the Food Shuttle will not provide any benefits traditionally associated with employment; and that I am responsible for my own insurance coverage in the event of illness or personal injury as a result of my services to the Food Shuttle.

Compliance

I understand that it is my responsibility to follow the guidelines and policies posted in the volunteer registration system, the Volunteer Handbook, and at the site where I am volunteering. Such guidelines include information about confidentiality; food safety and handling; personal safety and hygiene; dress code; and Food Shuttle abuse prevention [policies](#), Code of Conduct, and consumer protection standards.

Health and Safety

Following Center of Disease Control standards as related to COVID-19 and Respiratory Viruses, I understand it is my responsibility to monitor my personal health and that I should stay at home and follow health and safety guidelines, if I am experiencing symptoms, especially of a respiratory virus.

Assumption of Risk

I understand that my volunteer activities with Food Shuttle may include activities that could be hazardous to me and/or my children, including but not limited to packing, loading, unloading, and carrying heavy items, transportation to and from work sites, using tools, and the risk of being exposed to, contracting, and/or spreading COVID-19 or other infectious diseases. I fully understand and appreciate the risks that are inherent to my and/or my children's volunteer activities. I hereby choose to assume the risk of bodily injury, illness, death, medical treatment, and property damage resulting from my and/or my children's volunteer activities, even if resulting from the negligence of Food Shuttle or its officers, directors, employees or agents.

Screening

The Inter-Faith Food Shuttle reserves the right to conduct reference checks and a criminal background check on volunteers. I understand that once having been accepted, any information or data which I have given, that is false or misleading, can or may result in my dismissal as a volunteer. Any volunteer involved in an incident resulting in injury or vehicle damage will be required to take a drug test.

Media Release

I understand that while volunteering, the media and/or Food Shuttle may take photos, video, or audio of volunteers in action. I give permission to Food Shuttle to use my image/voice in news coverage and promotional material.



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AGRITOURISM WARNING: Under North Carolina law, there is no liability for an injury to or death of a participant in an agritourism activity conducted at this agritourism location if such injury or death results from the inherent risks of the agritourism activity. Inherent risks of agritourism activities include, among others, risks of injury inherent to land, equipment, and animals, as well as the potential for you to act in a negligent manner that may contribute to your injury or death. You are assuming the risk of participating in this agritourism activity.

Waiver and Release of Liability and Indemnification

I hereby forever release, discharge and agree to indemnify and hold the Food Shuttle harmless from, and waive on behalf of myself and my heirs and personal representatives and any minors I am responsible for who volunteer with me, 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 the Food Shuttle, or that may otherwise arise in any way in connection with any voluntary activities with, or for the Food Shuttle. I understand that this release discharges the Food Shuttle from any liability or claim that I or my heirs, personal representatives or minors I am responsible for may have against the Food Shuttle with respect to any bodily injury, illness, death, medical treatment, or property damage that may arise from or in connection with my volunteer activities. This liability waiver and release extend to the Food Shuttle together with all of its owners, officers, directors, affiliates, employees and agents.

I agree that this release will be governed by North Carolina law and that the exclusive venue for any dispute arising from this release will be a court of competent jurisdiction sitting in Raleigh-Durham, North Carolina.

By completing the check-in process and serving as a volunteer, I give my consent and agree to the terms in this document for myself and any minor dependents serving with me.

If NOT consenting to the waiver electronically in Bloomerang Volunteer, please complete this portion and return to the Food Shuttle Volunteer Services staff.

Signature:	Date:
Volunteer Name (printed):	
Email:	Phone number:

If you are over 18, you will receive occasional information on volunteer opportunities, our monthly "Food for Thought" newsletter, and an occasional organizational announcement or request to support our programs financially. You may unsubscribe at any time at the bottom of any e-mail, and we will never sell or use your information with an outside third party.