### Click to view original imageVolunteer Information Form

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Company/School/Organization \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Permanent Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Birthdate \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If volunteering as a family, please list additional family members (specify relationship):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you have any physical restrictions or special needs?

[ ]  No [ ]  Yes,\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you have any special skills or areas of interest?

[ ]  No [ ]  Yes,\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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### Consent Form

I understand that volunteerism at the Food Bank of Central & Eastern North Carolina may sometimes mean working in warehouse conditions and can sometimes include but is not limited to lifting, working around heavy moving equipment and handling damaged food products. I herby accept and assume full responsibility for any injury I might suffer while volunteering at the Food Bank of Central & Eastern North of Carolina. Volunteers are expected to follow safety rules and all other rules related to the warehouse. In the event of injury parents/guardians authorizes Food bank staff to seek treatment for minor volunteers (volunteers under 18 years of age) and to take other action should a medical emergency ariseand waive and release my right for damages.

**Parental Permission:** The Food Bank of Central & Eastern North Carolina will take all precautions to provide and maintain a safe environment for its volunteers. Volunteers are expected to follow safety rules and all other rules related to the warehouse. The Food Bank accepts no liability for minor volunteers who leave the Food Bank property without parental or guardian consent.

**Photo release:** I hereby give the Food Bank of Central & Eastern North Carolina permission to copyright and/or use, reuse and/or publish and/or republish pictures or images of me for the purpose of illustration, advertising, and promoting the Food Bank of Central & Eastern North Carolina through any medium. The Food Bank of Central & Eastern North Carolina has the right to change or alter this material.

**Restrictions and Guidelines:** All volunteers must adhere to the following safety restrictions and hygiene guidelines practice in order to avoid becoming a source of contamination and maintain a safe work environment.

* All volunteers must wash hands with soap that cleans and sanitizes before beginning work, and after eating, drinking, smoking, using the restroom, or otherwise soiling hands.
* Personal property is placed in designated areas.
* All volunteers must eat, drink and use tobacco products only in designated areas.
* All volunteers are prohibited from bringing food and belongings into work area.
* All volunteers are prohibited from placing personal items in any cooler or freezer used for product storage and/or distribution.
* Anyone with boils, sores, infected wounds or any other infection or communicable disease is not allowed to contact food.
* All volunteers are required to notify FBCENC management of any relevant infectious disease or conditions to which they may have been exposed.
* All volunteers are prohibited from rough housing and/or general horseplay.
* Jumping on or off loading docks is prohibited.
* Always watch footing around pallets especially as they are trip hazards.
* Always use proper lifting techniques.

**I acknowledge having read and understood the above consent form on:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date Printed Name Signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**If under 18, Guardian’s Signature**

**In case of an emergency, contact (please print):**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Name Relationship

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number (Including Area Code)