

**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: \_\_\_\_\_\_\_\_\_\_\_**

**Program Volunteering For:**

 **Volunteer SLPro Community Service Second Chance**

AVAILABILITY: MONDAY THROUGH THURSDAY 8 AM – 4 PM FRIDAY 8 AM – 3 PM

Volunteer work may include hard work and manual labor, including bending, stooping, reaching, kneeling, lifting and carrying. Places at which I complete my volunteer work have large or heavy equipment, trucks and crates of food and other materials.

**ACKNOWLEDGEMENT OF RISK AND RELEASE OF LIABILITY**

This Acknowledgement of Risk/Release of Liability (release) is made this \_\_\_\_\_ Day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_\_ by the undersigned:

 WHEREAS, I have volunteered my services to West Alabama Food Bank, an Alabama non-profit organization located at 3160 McFarland Blvd (“WAFB”)

 WHEREAS, I will receive no compensation for my service to WAFB;

 WHEREAS, I have read and understand the WAFB USDA Nondiscrimination Statement posted in the WAFB office;

 WHEREAS, I have been informed that my volunteer work will include hard work and manual labor, including bending, stooping, reaching, kneeling, lifting and carrying;

 WHEREAS, I have been informed that the places at which I complete my volunteer work may contain large or heavy equipment, trucks and crates of food and other materials, which may result in an increased risk of physical injury or death; and

 WHEREAS, I am in good health and physically able to perform volunteer 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.
2. 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 any photographs, film, video or audio tapes of me performing volunteer work for any purpose WAFB deems appropriate.**

**\_\_\_\_\_\_\_\_Yes (Initial) \_\_\_\_\_\_\_\_\_\_No (Initial)**