

Volunteer Requirements & Agreement - During COVID-19

Volunteer Requirements During COVID-19

During the COVID-19 pandemic, we are committed to providing a safe volunteer experience. In order to do this, we are requiring the following items:

Who can volunteer?

- Volunteers who are 16 years of age or older. Ages 12-15 with an adult for Free Farmers Markets and Donation Sorting shifts.
- Volunteers who have not experienced any symptoms of COVID-19 currently or in the past 14 days. Please
 visit the CDC website for more information https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html
- Volunteers who don't have an underlying medical condition that would put them in additional danger of contracting COVID-19. Please visit the CDC website for more information https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/index.html. We also recommend that volunteers 65 years of age and older review the CDC information to assess risk before committing to a volunteer shift.
- Volunteers who have not been exposed to anyone with COVID-19 symptoms, a positive COVID-19 test, or Influenza A or B within the last 14 days
- Volunteers who have not traveled outside of the United States during the last 14 days

The following precautions will be taken during the volunteer shift:

- Volunteers will follow social distancing guidelines
- Volunteers will wash their hands upon arriving at the Food Shelf or offsite volunteer shift and practice good handwashing practices throughout their shift. Gloves are not required but may be worn as long as they stay clean and sanitized (gloves can be provided).
- To create a safe and welcoming environment for our neighbors and follow guidance from the CDC and the State of Minnesota, the White Bear Area Food Shelf (WBAFS) will begin requiring the wearing of face masks in our building and on our grounds starting August 9, 2021. This will be required for all regardless of vaccination status.
- Volunteers may store items in the break room and keep the maximum number of three people in the room at one time

I agree to the requirements and safety precautions listed above:	
Volunteer Name:	
Volunteer Signature:	Date:

***Please bring this signed agreement to your first volunteer shift. Thank you for your commitment to our community through a healthy and safe volunteer experience!