

# **VOLUNTEER AGREEMENT**

The information in this application is strictly confidential and will be used only in the management of NBM and its programs.

Name/Nickname:						
Work Phone:		Work E-mail:				
Home Address:			City:		State:	Zip:
Home Phone:		Cell Phone:		Home E	-mail:	
Current Company/Employer/Organization						
Emergency Contact:	Name:					
	Address:					
	Phone/Cell:					
Do you have any medic Please explain:	Yes	🗖 No				

Agreement to adhere to coronavirus precautionary measures:

I acknowledge that New Bethany Ministries is doing everything it can to protect the public as well as its staff and volunteers. To this extent, I agree to follow Center of Disease Control (CDC) and local health district guidelines and New Bethany Ministries policies and procedures for social distancing to reduce the spread of Novel Coronavirus, or COVID-19 or any other communicable disease. This will require me to maintain six (6) feet of distance between myself, staff, and other patrons of the organization as much as humanly possible. I agree to properly wear a face covering or improvised mask such as a scarf, bandana, and/or handkerchief over my nose and mouth to reduce the risk of exposure to myself and others.

#### Agreement to keep New Bethany client data confidential:

I understand that in the course of my volunteer work I may learn the identity and other information concerning clients of NBM. I agree not to disclose their names or any other information concerning clients of NBM, to anyone except authorized NBM staff or volunteers, and solely for the purpose of providing NBM services or conducting NBM projects in the program area to which I am assigned.

### Hold harmless agreement:

I agree not to hold NBM, its officers, staff, volunteers, or clients liable for any injury or illness in the very unlikely event that this may result from my volunteer service to program clients

## *Permission to use photographs and/or audio-visual:*

I give permission to New Bethany Ministries to use, reproduce, publish photographs and/or video. I understand that this material may be used in various publications, press releases, fundraising materials, televised broadcasts, or on the New Bethany website and social media pages.

## Please affirm the following, as required by the Child Protective Service Law

By signing this agreement, I affirm that I have not been named as a perpetrator of a founded report of child abuse within the past five (5) years as defined by the Child Protective Services Law.