



Volunteer Consent Form

(Please PRINT and bring to your shift)

Today's Date: _____

First Name: _____ Nickname: _____ Last Name: _____

Birthdate: _____ / _____ / _____

I am under 18 years of age.

Are there any physical limitations that might affect your ability to perform certain types of work or interfere with your safety? Y / N Please explain: _____

Primary EMAIL: _____ Secondary EMAIL: _____

Primary PHONE: _____ Secondary PHONE: _____

Street Address: _____ City: _____

Zip: _____ County: _____ Group Volunteering With: _____

EMERGENCY CONTACT:

First & Last Name: _____ Relationship: _____

Phone: _____ Secondary Phone: _____

Volunteers must wear fully enclosed shoes. Open-toed shoes, KEENS, CROCS, heels, soccer slippers, medical boots, and slippers are **not** allowed. Some projects require volunteers to remove jewelry. The Food Bank is not responsible for lost or stolen items; please leave valuables at home. Dress for weather when working for all outdoor Grocery Distribution opportunities.

MINORS: Volunteers **must be at least 8 years old—Food Sort/Pack shifts** and **12 years old—Grocery Distribution shifts**. Individuals under the age of 18 must have parent/guardian consent. In the event of an injury, the parent/guardian authorizes Food Bank staff to seek treatment for minor volunteers and to take action should a medical emergency arise and waives and releases their right for damages. The Food Bank accepts no liability for minor volunteers who leave the Food Bank property without parental/guardian consent.

WAIVER: I understand that volunteering with Northern Illinois Food Bank may involve working in warehouse conditions or outdoor conditions no matter the weather and can sometimes include, but is not limited to, lifting, standing for several hours, packing frozen foods in cooler temperatures, working around moving vehicles and other equipment, and handling food products, including products containing peanuts and/or tree nuts. I am expected to sign in for my shift upon arrival and to follow safety rules and all other guidelines related to the volunteer opportunity. I hereby accept and assume full responsibility for any injury I might suffer while volunteering.

PHOTO RELEASE: I hereby give Northern Illinois Food Bank 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/or promoting the agency through any medium.

I acknowledge that I have read and understood the above consent on this **date:** _____, 20_____.

Volunteer's Signature

Parent/Guardian's Signature (for those under 18)

I do NOT wish to receive Northern Illinois Food Bank's e-newsletter.

I am interested in becoming a skills-based volunteer. My skills/areas of interest are: _____