

**Westmoreland County Food Bank
Guidelines for Warehouse, Office,
CSFP & Backpack Volunteer**

Office Use Only	
___ CTK	___ CTK
___ Access	___ Access
___ Excel	___ Excel
___ Email	___ Email
___ File	___ File
___ Sent letter for signature	___ / /
___ Need waiver	
___ Other	

Volunteer's Name _____ **Phone** _____

PLEASE PRINT

Email _____ **Volunteer** **RSVP** **Court-ordered Com. Service**

Address _____
Street City Zip Code

Organization/School/Business _____

- I have read and agree to follow the policies and procedures of Westmoreland County Food Bank.
- Under no circumstances are volunteers under the **age of 14** permitted to work in the warehouse, due to possible hazards and Child Labor Laws. We do have special volunteer days in which we have volunteers, **under 14 years of age or those with challenges, work in our "safe" room**, but they must be accompanied by an adult.
- Make sure you are **physically capable** of doing the labor required, when offering to volunteer. There are some positions not so physically challenging available upon request.
- Our warehouse is a **smoke-free** environment. As a safety precaution, **do not use cell phones** while in the warehouse working area.
- To ensure your comfort, it is advisable, especially in the winter, to dress in layers and to wear appropriate attire, suitable for warehouse or outside work. Absolutely, no bare mid-drifts, super short shorts, or any type of seductive clothing allowed. **Also, as a safety precaution, open-toed shoes are not permitted.**
- To ensure your safety, no open-toed shoes, cell phones or ipod use in warehouse. Smoking is permitted in designated areas, only. All personal belongings should be locked in your vehicle. WCFB assumes no responsibility for damage to or loss of personal property. Do not volunteer if you are ill. While handling food, please follow food safety procedures and wash hands accordingly. Report any injuries to WCFB staff.
- Volunteers are not permitted to take any products from the warehouse or its partner agencies under any circumstances without prior approval. Any volunteer doing so, can be terminated or even prosecuted by the law.
- If you have made arrangements for coverage in the local press or plan to have a photographer present, please let us know about this as soon as possible prior to your scheduled date. We also request that you provide us with a copy of any kind of press release regarding your volunteering here, prior to its release to the media.
- Please make every effort not to cancel, as we have made commitments to our member agencies for the product processed during your session. However, if you need to cancel please call immediately.
- Please be flexible. There may be times, when shipments might be delayed, sometimes outside of our control, and your volunteer session might need to be postponed to another date or cancelled. In that case you will be notified, as soon as possible.
- It is the right of Westmoreland County Food Bank to terminate any volunteer for inappropriate behavior or dress, violation of warehouse rules, or any action which prevents us from meeting our goals.

I have read and understand the above guidelines: _____
Volunteer Signature Date

Parental Consent required if volunteer is under age 18

_____ **has my permission to participate as a volunteer with WCFB.**
(Print name of minor)

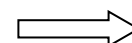
If I cannot be reached in the event of an emergency, the following person is authorized to act on my behalf:

Name (print): _____ **Relationship to Child** _____ **Age of Child** _____
Phone no.: _____

I have read and understand the above guidelines: _____
Signature of Volunteer's Parent/Guardian Date

Please review these guidelines carefully, then sign and return this original form to:

Volunteer Coordinator, Westmoreland County Food Bank, Inc 100 Devonshire Drive Delmont PA 15626



Volunteer Waiver and Release of Liability

PLEASE READ CAREFULLY BEFORE SIGNING

In consideration of being allowed to participate in events and volunteer activities through Westmoreland County Food Bank, Inc., hereinafter as WCFB, I acknowledge and agree that:

1. I am volunteering to assist WCFB in its events and volunteer activities, including, but not limited to warehouse or office help, packing of food boxes or backpacks, Operation Fresh Express, food pantry distribution, food drives or gleaning programs.

2. I acknowledge that participation as a volunteer with WCFB and in its related events and volunteer activities carries with it the risk of death, serious injury, disability and/or property loss. I knowingly and freely assume all risks from my participation in the events and volunteer activities.

3. I hereby release and discharge WCFB, its partner and member agencies, donors, sponsors, the owners and lessors of premises used for the events and volunteer activities, and each of their officers, directors, members, employees, agents, representatives, heirs, successors and assigns (hereinafter collectively referred to as Releasees) from any and all liability, claims or causes of action, of whatever kind, foreseen or unforeseen, including, but not limited to those for personal injury, death, disability, property damage or other harm, arising out of or in any way connected with my participation in the events and volunteer activities, including those caused by the negligent acts or omissions of the Releasees.

4. I further agree to indemnify defend and hold harmless Releasees from any and all claims, causes of action, damages or liabilities of any kind, including the expenses of litigation and attorney=s fees, arising out of or in any way connected with my participation in the events and volunteer activities.

5. I understand and agree that this Volunteer Waiver and Release of Liability is binding on my next of kin, heirs, executors, administrators, successors, assigns, personal and legal representatives.

I have read the foregoing Volunteer Waiver and Release of Liability, fully understand its terms, understand that I have given up substantial rights by signing it, and am voluntarily signing below, intending to be legally bound.

Signature of Volunteer

Date: _____

Print Name of Volunteer

If volunteer is under 18, a parent or guardian must also sign this Volunteer Waiver and Release of Liability.

I, as parent or guardian with legal responsibility for the volunteer, consent and agree to the terms and conditions as stated in the Volunteer Waiver and Release of Liability as provided above, and for myself, my next of kin, heirs, executors, administrators, successors, assigns, personal and legal representatives, hereby release and agree to indemnify and hold harmless the Releasees from any and all claims and liabilities arising out of or in any way connected with my minor child or ward=s participation in the events and volunteer activities as provided above, even if arising from the negligent acts or omissions of the Releasees.

Name: _____ Relationship to Child: _____ Age of Child _____

Signature of Parent/Legal Guardian: _____ Date: _____

See over

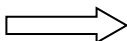


Photo Release and Consent Form

Individuals who donate to, volunteer for, or receive food from **Westmoreland County Food Bank** are occasionally asked to be part of Food Bank publicity, publications, and/or public relations activities. In order to guarantee personal privacy and ensure your agreement to participate, Westmoreland County Food Bank asks that you sign this form.

Your signature indicates approval for your name, picture, verbal statements or portraits (video or still) to appear in Westmoreland County Food Bank publicity. Westmoreland County Food Bank may use the pictures and/or videos in subsequent years.



I authorize Westmoreland County Food Bank to use my photograph in any or all of its publicity. Said photographs shall remain and be the property of Westmoreland County Food Bank. They may be used with or without my name or using my initials of a fictitious name.

I, also, agree I will not be compensated for these pictures and my consent and release have been given without coercion or duress.

I hereby release Westmoreland County Food Bank, any of its associated or affiliated services, their directors, officers, agencies and employees from all claims of any kind on account of such use.

I have read the foregoing and fully understand the contents.

Please sign below, giving your permission to be photographed.

Printed Name _____

Signature X _____

Effective Date of Agreement _____ Pantry # _____ (optional)

If a person appearing is a minor (under 18 years of age), a parent or legal guardian must sign the form as well.

Parent/Legal Guardian Signature _____ Date _____



DIRECTIONS TO WESTMORELAND COUNTY FOOD BANK

- From Greensburg, take Route 66 North
 - Make a left onto 22 West (following signs for Murrysville)
 - At the first Traffic Light on 22 (there will be a Get-Go gas station on your right), make a left onto Cloverleaf Drive.
 - Make first left onto Devonshire Drive. Westmoreland County Food Bank will be at the corner of Cloverleaf and Devonshire. It is a large green building.
 - Make a right into the Food Bank lot.
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- From Murrysville, take Route 22 E to just before Delmont area. At Get Go (which is on your left) make a right onto Cloverleaf Drive.
 - Make first left onto Devonshire Drive. Westmoreland County Food Bank will be at the corner of Cloverleaf and Devonshire. It is a large green building.
 - Make a right into the Food Bank lot.
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- From the North, take Route 66 S to Route 22 W in Delmont.
 - At first light at Get Go make a left onto Cloverleaf Drive.
 - Make first left onto Devonshire Drive. Westmoreland County Food Bank will be at the corner of Cloverleaf and Devonshire. It is a large green building.
 - Make a right into the Food Bank lot.

If you are coming for a Saturday volunteer opportunity, please enter through double green doors on left side of building.

Call 724-468-8660x13 if you need to cancel or have any questions about this opportunity.