

Volunteer Registration Form

Date _____

Name _____

Address _____

Phone No. _____ Cell _____

Email _____

Birth Date _____

Past occupation if retired _____

Is this a required Community Service? ___ No ___ Yes ___ # of hours

Interested Hobbies, Talents, Travels, Etc. _____

How did you hear about this volunteer opportunity?

PREFERRED VOLUNTEER ACTIVITY (Please Check)

- ___ SORTING AND PACKAGING FOOD
- ___ DRIVER TO PICK UP FOOD (Large Vehicle Helpful)
- ___ UNLOAD FOOD DELIVERY (Able to lift at least 40lbs.)
- ___ NEIGHBORHOOD DISTRIBUTION
- ___ SPECIAL EVENTS
- ___ DATA ENTRY
- ___ RECEPTIONIST
- ___ GRANT WRITER
- ___ OTHER

SCHEDULE _____

NOTES _____

Volunteer Waiver

1. As a volunteer of Ministries Unlimited Food Pantry, I hereby agree to hold harmless and waive any and all claims or causes of action against the Ministries Unlimited Food Pantry arising out of any cause whatsoever, including but not limited to claims arising out of negligence or intentional conduct of its volunteers or agents.
2. I attest that I am physically fit and prepared to perform the tasks assigned to me as a Ministries Unlimited Food Pantry volunteer. (Let us know if you have a disability and we will try to find an appropriate task for you.)
3. I further agree to use my personal insurance as the primary provider in the event of injury due to my work as a volunteer for Ministries Unlimited Food Pantry.
4. I shall not operate a personal vehicle for volunteer activities unless I have a valid Driver's License and at least the minimum amount of liability insurance required by Illinois law.
5. Ministries Unlimited Food Pantry is not responsible for loss or damage to volunteer's personal property.
6. I also grant the Ministries Unlimited Food Pantry full permission to use photographs of me for publicity and promotional purposes.

I have read, understand and agree to the above Ministries Unlimited Food Pantry policy and waiver.

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| Volunteer's Signature | Print Name | Date |

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| If under 18, signature of parent or legal guardian is required | Date |

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| | |
| Print Name | Relationship |