

CONSENT FORM: Volunteers under 18 years

Dear Parent or Guardian,

We are excited about your child/dependent's interest in volunteering with the Greater Vancouver Food Bank. This form is to be filled out before the commencement of volunteer duties with the Greater Vancouver Food Bank. It is the applicant's responsibility to notify/update appropriate supervisors of any changes of information. Please note that the Greater Vancouver Food Bank abides by the BC Privacy Legislation Guidelines and is committed to respecting the privacy of our volunteers.

Please understand the following:

1) I understand that the minimum age of a volunteer is 15 and that all volunteers between the age of 15 and 17 must have parental/guardian consent in order to volunteer.

2) I accept the responsibility for my child/dependent's safety and security, and personally undertake to have my child/dependent act in a responsible and safe manner as well as to adhere to the volunteer code of conduct.

3) Code of Conduct:

As a volunteer for the Greater Vancouver Food Bank:

- I will work to fully understand my role and actively engage with staff, fellow volunteers and the community
- I will treat others around me with kindness, dignity and respect
- I agree to provide a criminal record check consent form
- I will notify my supervisor or department manager of any changes to my information or health
- I understand that volunteering for the Greater Vancouver Food Bank is voluntary and as with any task, there may be a degree of risk in undertaking certain tasks. After carefully considering the risks involved, I will take reasonable precautions to ensure my own safety.

4) Confidentiality Agreement:

As a part of your volunteer work, you may come into contact with information of a sensitive nature. This Agreement is intended to inform you of private and protected information so you can assist us in upholding the confidentiality of information within our organization. This following information may include confidential information of the Greater Vancouver Food Bank:

- Information concerning the business and operation of the Greater Vancouver Food Bank, including written, verbal, and electronic communication.
- Clients, volunteer, donor and agency information (name, address, phone number, company, donation amounts).

5) Awareness of Risks:

I, the parent/guardian of the undersigned child (the "Child"), desire to have the Child participate as a volunteer for the Greater Vancouver Food Bank Society ("GVFBS") in full knowledge and understanding of the risks associated with the Child's participation as a volunteer for GVFB and now freely accept and assume such risks which include, without limitation, risk of minor or major bodily injury (including death), damage or theft to property or other loss or damage arising out a variety of dangers and hazards such as overexertion, dehydration, fatigue, lack of fitness or conditioning, traumatic injury, defective, dangerous or unsafe condition of facilities or equipment, falls, collisions with objects, walls, equipment or persons and negligence or other acts or omissions of GVFB employees, agents, other volunteers, invitees or users of GVFB facilities.

I, the undersigned Child, am aware of and now freely accept and assume the risks associated with my participation as a volunteer for GVFB.

6) Waiver of Liability:

I, the parent/guardian of the Child, irrevocably and unconditionally (a) fully remise, release and discharge GVFB and its agents, successors and assigns (collectively, the “Releasees”) from any and all claims, demands, suits, actions, causes of action and proceedings of any kind (whether arising at law, in equity or under statutory authority and whether in contract, tort or otherwise) arising out of or in connection with the Child’s participation as a volunteer for GVFB, including, without limitation, those relating to personal injury, bodily injury or death (collectively, the “Claims”); and (b) agree to indemnify and hold harmless the Releasees against and from all Claims which may hereafter be brought against them or any of them by or on behalf of the Child and all judgments, settlements, debts, liabilities, costs, expenses and damages of any nature suffered by them or any of them in connection with such Claims.

By completing the information and signing below, I consent to the Child volunteering with GVFB and confirm that I believe the Child is physically, emotionally and mentally able to do so. I understand and agree to all of the terms and conditions described in this Consent Form.

Volunteer Information of Child:

Last Name: _____ First Name: _____

Home Address: _____

City: _____ Postal Code: _____

Phone: _____ Email: _____

Date of Birth: _____ Age: _____ Gender: _____

Parent / Guardian’s Emergency Contact Information:

Last Name: _____ First Name: _____

Phone: _____ Relationship: _____

Volunteer Signature

Date

Parent/Legal Guardian Signature

Date

We would be happy to answer any questions you may have.

Volunteer Recruitment Coordinator

Phone: 604.880.7073

Email: volunteer@foodbank.bc.ca