



## The United Food Bank of Plant City Volunteer Policy

The United Food Bank of Plant City would like to thank you for choosing to volunteer at our organization. We are always in need of volunteers with willing hands and a caring heart. The time you spend here can help make a meaningful impact in the lives of people in your community.

Name \_\_\_\_\_

Address \_\_\_\_\_

Email Address \_\_\_\_\_

Phone Number \_\_\_\_\_

Date \_\_\_\_\_



## **The United Food Bank of Plant City Volunteer Guidelines and Provisions**

This agreement is intended to indicate the importance of The United Food Bank of Plant City Volunteer Program. We appreciate your contributions to the UFBPC and are committed to providing you with a meaningful and rewarding experience.

### **Volunteer Guidelines**

I agree to serve as a volunteer and commit to the following:

- 1.) Adhere to UFBPC safety regulations pertaining to the volunteer job.
- 2.) Complete tasks and assignments to the best of my ability.
- 3.) Meet agreed upon commitments or provide adequate notice so alternative arrangements can be made.
- 4.) Provide attendance record by signing in for each shift including your name, start time, locations/tasks and end time.
- 5.) Assume responsibility for obtaining formal parent/guardian consent for participants under the age of 16.
- 6.) Adhere to the dress code. Closed toe shoes and comfortable modest clothing is required.

### **Volunteer Provisions**

- 1.) Volunteers are bound and shall comply with all provisions of this agreement and the instructions of the Warehouse Supervisor while performing any work authorized by this agreement.
- 2.) Care shall be exercised at all times to protect the confidentiality of all clients of the UFBPC.
- 3.) I understand that noncompliance with these guidelines and provisions for volunteering may lead to my dismissal from the UFBPC Volunteer Program.
- 4.) Volunteer hours are Monday, Wednesday, Friday from 9:00 a.m. – 1:00 p.m. and Tuesday and Thursday from 1:00 p.m. – 5:00 p.m.



- 5.) A volunteer is expected to be faithful in honoring his/her commitment; in the event the volunteer is not able to work on a day assigned, he/she must notify the Warehouse Supervisor.
  
- 6.) The UFBPC and its officers, employees and agents shall not be held liable for any death, injury, or property damage claims arising from volunteer work. If any claim arises out of the forgoing, the organization/volunteer shall defend, indemnify and save harmless the UFBPC and its officers, employees and agents from the same.
  
- 7.) This agreement shall be cancelled by the United Food Bank of Plant City for nonconformance with the agreement or failure to adhere to direction given by the UFBPC.
  
- 8.) I understand that UFBPC may record my photograph, videotape and/or conduct an interview for future use in volunteer related material. I understand that my photo, video and/or quote may be used for the sole purpose of volunteer recruitment, recognition and publicity. I understand that my photo, videotape and/or quote may be included in UFBPC's webpage, social media platforms, in literature distribution to the public or on display units in public areas. I realize that my participation is voluntary, and that I will receive no compensation. I further understand that photographs, videotape and quotes become property of the UFBPC.
  
- 10.) As a volunteer, I am not an employee of the UFBPC; I understand that I am not covered by Worker's Compensation and that my volunteer agreement may be cancelled at any time. If I use my own vehicle for any UFBPC business, I will maintain state licensing and insurance as required by law and provide a copy to the UFBPC.

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_



## **POLICY ON SEXUAL AND RACIAL HARASSMENT**

This organization will not tolerate any harassment that degrades or shows hostility towards an individual because of race, color, religion, sex, national origin, age or disability, including, but not limited to slurs, jokes, verbal abuse, stereotyping, threats, intimidation, hostile acts, or denigration or hostile written or graphic material circulated or posted in the premises. Anyone who violates these guidelines will be asked to leave the premises. Anyone subjected to any type of harassment whatsoever should immediately contact the director and the matter will be completely and thoroughly investigated.

1. Sexual Harassment is generally defined as any unwanted physical, verbal or visual sexual advances, requests for sexual favors, and other sexually-oriented conduct, which is offensive or objectionable to the recipient, including, but not limited to, epithets: derogatory or suggestive comments (e.g. about an individual body or person), slurs or gestures: and offensive posters, cartoons, pictures or drawings.
2. Management at all levels is responsible for reporting and taking corrective action to prevent harassment.
3. Anyone who has a complaint of sexual harassment by anyone involving this organization, including volunteers, associates or visitors, should report the alleged act immediately, and without fear of reprisal, to a the organization's director.
4. An investigation of all the complaints will be undertaken promptly, giving due regard to the need for confidentiality.
5. Anyone who has been found by this organization, after an appropriate investigation, to have harassed any employee, volunteer or visitor is in violation of this policy will be asked to leave and not return.

The following conduct can be as serious (or even more serious) than harassment itself:

- Ignoring or concealing harassment, or treating it as a joke
- Failing to report known harassment
- Retaliating against anyone reporting or complaining of harassment
- Being dishonest or refusing to cooperate with a harassment investigation

Violation is subject to discipline under paragraph 5 above.

We trust that all associates of the organization will continue to act responsibly in a business-like manner to ensure a pleasant environment free of harassment and discrimination.

I have read and understand the company policy on sexual and racial harassment.

Date: \_\_\_\_\_

Volunteer's Signature: \_\_\_\_\_



## Liability Waiver

Florida law prohibits discrimination of race, color, religion, sex, national origin, disability, age, or marital status. I, \_\_\_\_\_, the under-signed volunteer of United Food Bank and Services of Plant City, Inc., 702 E. Alsobrook Street, Ste # H, Plant City, FL 33566, do not and will not hold the aforementioned party or representatives responsible for any injury or loss incurred on or off premises relating to the Food Bank or its operation.

\_\_\_\_\_  
Signature of Volunteer

\_\_\_\_\_  
Volunteer (please print name)

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Today's Date

\_\_\_\_\_  
Telephone



**EMERGENCY DATA SHEET**

NAME \_\_\_\_\_ SSN: \_\_\_\_\_

DOCTOR'S NAME \_\_\_\_\_

DOCTOR'S PHONE # \_\_\_\_\_

HOSPITAL OF CHOICE: \_\_\_\_\_

**PRIMARY CONTACT INFORMATION**

NAME: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ COUNTY \_\_\_\_\_ STATE \_\_\_\_\_

PHONE NUMBERS: HOME \_\_\_\_\_  
CELL \_\_\_\_\_ (if applicable)  
WORK \_\_\_\_\_ (if applicable)

**ALTERNATE**

NAME: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ COUNTY \_\_\_\_\_ STATE \_\_\_\_\_

PHONE NUMBERS: HOME \_\_\_\_\_  
CELL \_\_\_\_\_ (if applicable)  
WORK \_\_\_\_\_ (if applicable)

Please list any allergies/drug interaction problems:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_