

Volunteer Guidelines and Agreement

We encourage you to get to know our guests and demonstrate empathy and active listening to them.

Please refer them to a staff member if they ask for assistance or have questions.

DRESS CODE

Shoes:

• Closed-toe shoes ONLY -- no flip flops or sandals (highly recommend tennis shoes rather than flats or heels)

Clothing:

- Jeans, long pants, capris
- Shorts MUST be fingertip length or longer
- Yoga pants/leggings ONLY allowed if paired with a shirt that is longer than waist length
- No crop tops or spaghetti strap tank tops

GUIDELINES

- Volunteers must be at least five years old. Volunteers 5-11 must be accompanied by a parent or guardian at all times and cannot serve in the kitchen. Volunteers 12-17 must be accompanied by a responsible adult at all times. Please notify us of the ages of volunteers in your group so we can appropriately place your group.
- Please do not give guests direct donations or significant cash. Once guests have expressed their needs, HF has the resources to meet them, so please refer them to a staff member. However, you are welcome to bring donation items. Please contact the Volunteer Coordinator for a list of needed items.

- Feel free to take pictures of the facility and your group. However, due to confidentiality, we do not include the faces of our guests without their consent.
- Since we do not have a secure place to store belongings, please only bring what you need. We can keep it on you. Please also remember to stow all belongings in vehicles that are out of sight. HF assumes no responsibility for lost, damaged, or stolen personal property.

For your protection, please note:

- We serve many types of individuals. We ask that you DO NOT exchange personal information with our guests, including, but not limited to, social media, your phone number, and where you reside. Never give them any personal information or meet with them outside of HF for both your and their safety.
- Both volunteers and guests are to be treated with respect at all times. If you experience conflict with a guest, observe inappropriate behavior, or feel uncomfortable, please find a staff member immediately to resolve the issue. We do not encourage fraternization between volunteers, staff, and guests when serving on campus. Please remain calm and understand the stress our guests are under.

We are located at **705 Virginia Avenue, Kansas City, MO 64106**. Please call (816) 471-4673 for directions. Upon arrival, please park in the street on Admiral Blvd. Remember not to bring valuable items to our facility and to leave all valuables securely out of sight in your vehicle.

If you need to cancel, please provide at least 24 hours' notice and call the Development & Marketing Coordinator. If the number of volunteers in your group changes before arrival, please notify us so we can place your team accordingly.

Any questions, comments, or concerns?

Contact:

Katie Carlson, Development & Marketing Coordinator 816-298-6134 | <u>katie@hopefaith.org</u>

Volunteer Liability Release

This Release and Waiver of Liability (the "Release") is executed on the date as signed by the "Volunteer" in favor of Hope Faith, Inc., a nonprofit corporation, their directors, officers, employees, interns, guests, other volunteers and agents (collectively "HF").

The Volunteer desires to work as a volunteer for HF and engage in the activities related to being a volunteer (the "Activities"). The Volunteer understands that the Activities may include heavy lifting, risk of personal injury, etc.

Release and Waiver

Volunteer does at this moment release and forever discharge and hold harmless HF and its successors and assigns from any liability, claims, and demands of whatever kind or nature, either in law or in equity, which arise or may hereafter arise from Volunteer's Activities with HF. Volunteer understands that this Release discharges HF from any liability or claim that the Volunteer or any of the volunteer's family members may have against HF, its staff, or its officers concerning any bodily injury, personal injury, illness, death, or property damage that may result from Volunteer's Activities with HF, whether caused by the negligence of HF or its officers, directors, employees, agents, or otherwise. Volunteers also understand that HF does not assume any responsibility for or obligation to provide financial assistance or other assistance, including but not limited to medical, health, or disability insurance in the event of injury or illness.

Medical Treatment

Volunteer does at this moment release and forever discharge HF from any claim whatsoever which arises or may hereafter arise on account of any first aid, treatment, or service rendered in connection with the Volunteer's Activities with HF.

Assumption of Risk

The Volunteer understands that the Activities include work that may be hazardous to the Volunteer, including, but not limited to, heavy lifting, risk of personal injury, etc. Volunteer at this moment expressly and specifically assumes the risk of injury or harm in the Activities and releases HF from all liability for injury, illness, death, or property damage resulting from the Activities.

Insurance

The Volunteer understands that HF does not carry or maintain health, medical, or disability insurance coverage for volunteers except as otherwise agreed to by HF in writing.

Photographic Release

Volunteer does hereby grant and convey unto HF all rights, titles, and interest in any photographic images and video or audio recordings made by HF during the Volunteer's Activities with HF, including, but not limited to, royalties, proceeds, or other benefits derived from such photographs or recordings.

Other

Volunteer expressly agrees that this Release is intended to be as broad and inclusive as permitted by the laws of the State of Missouri and that this Release shall be governed by and interpreted by the laws of the State of Missouri. Volunteer agrees that if any clause or provision of the Release shall be held invalid by any court of competent jurisdiction, the invalidity of such clause or provision shall not otherwise affect the remaining provisions of this release, which shall continue to be enforceable.

Full name	e (print):					
Address:						
	Street	Apt #	City	State	Zip	
Phone:	Phone: (H) (C) Alt. Phone:					
Email:						
Emergen	cy Contact:					
Emergency Contact Phone:					(W) (H) (C)	
Are you a		f age or older?				
Date of B	Date of Birth: Male Female					
Are you h		ization, school, o	or church gro	up?		
lf yes, wh	0?					
Do you at D YE		h?				
Name:						
)			you want us to	know?	
If yes, wh	at?	· · · · · · · · · · · · · · · · · · ·				

Volunteer Waiver

I, the Volunteer, agree that I have received a copy of the **Volunteer Guidelines** and **Liability Release** forms. I understand that I will be expected to follow all current and future guidelines and staff direction while serving at Hope Faith. I now release and forever discharge and hold harmless HF, its successors, and its assignees from any liability, claims, and demands of whatever kind or nature, either in law or in equity, which arise or may hereafter arise from Volunteer's Activities with HF. I freely, voluntarily, and without duress execute this Release under the above terms.

Signature:_____

Date: _____

Legal Guardian (if the volunteer is under age 18):

Date: _____