



## Islamic Food Bank of Toledo, LLC, Volunteer Application & Agreement

Please complete the full form and email to [ifbt@icgt.org](mailto:ifbt@icgt.org)

### Volunteer Info:

Full Legal Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Preferred Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

### Emergency Contact Info:

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Preferred Phone #: \_\_\_\_\_

Do you have any health concerns or special needs we should be aware of?

\_\_\_\_\_

### Program Sign-Up:

I am interested in volunteering for the following types of activities (select all that apply):

- Mobile Food Bank visits (packing/distribution of 250+ meals on second and fourth Saturdays)
- Panera weekly pickup/delivery (pickup from Panera and drop-off to community partner sites)
- Transportation of meals, food bags, pantry items, etc. (Driver's license #: \_\_\_\_\_)
- Virtual/at-home opportunities (e.g. online grocery shopping)
- Special events/holiday packing and distribution
- Other (any other knowledge, skills, or abilities you wish to contribute): \_\_\_\_\_

\_\_\_\_\_

### **VOLUNTEER AGREEMENT**

This is a legal agreement between The Islamic Food Bank of Toledo, LLC, an Ohio nonprofit limited liability company ("IFBT"), and me as a volunteer.

#### **Disclaimer and Liability and Photo Release Waiver**

IFBT does not discriminate on the basis of creed, political affiliation, race, color, national origin, religion, disability, age, gender, or status as a disabled or Vietnam-era veteran. IFBT accepts service of all volunteers with the understanding that such service is at sole discretion of IFBT. I agree that either I or IFBT may at any time, with or without cause, decide to terminate my relationship with IFBT.

I hereby acknowledge that I have volunteered to assist IFBT. I understand as a volunteer that I will not be paid for my services or reimbursed for my expenses (unless reimbursement is specifically authorized in writing), that I will not be eligible for any workers' compensation benefits. I agree to follow all rules and regulations of IFBT and to serve in a professional, responsible manner.

My services shall be under the direction of IFBT. I understand that any such services must be satisfactory to IFBT.

I hereby agree that I, on behalf of myself, my heirs, assigns, guardians and legal representatives will not make a claim against IFBT, its affiliated organization, and their respective officers, directors, members, managers, agents, employees and/or volunteers, regarding injury or death to me or damage to my property, however caused, in connection with my services to IFBT. Without limiting the generality of the foregoing, I hereby waive and release any rights, actions, or causes or action resulting in personal injury or death to me, or damage to my property, sustained in connection with my services to IFBT.

I further hereby agree to indemnify and hold harmless IFBT, its affiliated organization, and their respective officers, directors, members, managers, agents, employees and/or volunteers, against any claim for damages, compensation, or otherwise, on behalf of myself, my assignees, heirs, guardians, executors, administrators, or personal representatives, and agree to reimburse or make good any loss or damages, or costs, including attorneys' fees, that IFBT may incur if any litigation arises on account of any claims to IFBT.

I authorize the IFBT to use my name, statements and likeness, without charge, for promotional or other purposes, such as in IFBT publications, advertising, video, websites, social media, news media, or other formats.

**Confidentiality Statement:**

As a volunteer for IFBT, I may have access to confidential and privileged information and materials obtained through my affiliation with IFBT. I shall not share any such information or materials with anyone within or outside IFBT not intended to receive them. This includes, but is not limited to specific names, address, and other identifying information about the communities and individuals IFBT serves, IFBT financial or donor information in files, databases, and mailings, etc.

By signing below, I agree to honor the Volunteer Agreement above.

Applicant Signature: \_\_\_\_\_

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

**If Volunteer is Under the Age of 18:**

If you are under the age of 18, you are required to show proof via ID **and** enter your birthdate below. Entering a birthdate if you are 18 years or above is optional.

Age: \_\_\_\_\_

Birthdate: \_\_\_\_\_

**Parent/Guardian Info – required if the volunteer is under 18 and/or cannot show proof of age via ID**

First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Primary Phone: \_\_\_\_\_

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

**Parental Consent– required if the volunteer is under 18 and/or cannot show proof of age via ID**

I am the parent or legal guardian of the minor child named above, who wishes to participate in volunteer work for IFBT as described above. I hereby give my permission for him/her to serve in that capacity and I agree to the Volunteer Agreement above on behalf of my minor child.

Parent/Guardian Signature: \_\_\_\_\_

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