**A group of people standing next to each other

AI-generated content may be incorrect.**

Volunteer Package

Provided by Rma risk management

## Table of Contents

[Volunteer Position Description 2](#_Toc198625898)

[Volunteer Screening Checklist 3](#_Toc198625899)

[Volunteer Police Record Check Letter 4](#_Toc198625900)

[Volunteer Interview Form 5](#_Toc198625901)

[Volunteer Reference Check Form 6](#_Toc198625902)

[Volunteer Emergency Contacts Form 7](#_Toc198625903)

[Volunteer Agreement and Waiver 8](#_Toc198625904)

[Volunteer Confidentiality Agreement 9](#_Toc198625905)

[Volunteer Evaluation Form 10](#_Toc198625906)

[Sample Volunteer Form 11](#_Toc198625907)

[**Guidelines for Responsible Use of Social Media** 14](#_Toc198625908)

[Sample Volunteer Media Agreement 16](#_Toc198625909)

[Volunteer Letter to Insurance Company Personal Vehicle Use 18](#_Toc198625910)

# Volunteer Position Description

Position description title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Purpose: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Time Commitment:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Major responsibilities: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Required competencies, skills and qualifications: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Orientation and training to be provided: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Working conditions: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Supervision and Evaluation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Screening Requirements: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

FOR OFFICE USE ONLY

Level of risk for screening: Level 1 – Low risk\_\_\_\_\_ Level 2 – Medium risk \_\_\_\_\_ Level 3 – High risk\_\_\_\_\_

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

# Volunteer Screening Checklist

Volunteer Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Position title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |
| --- | --- | --- |
| Documents Received | Date | Documented By |
| Completed application form |  |  |
| Volunteer position description (provided or reviewed) |  |  |
| Attached interview form |  |  |
| Attached form for satisfactory reference check 1 |  |  |
| Attached form for satisfactory reference check 2 |  |  |
| Signed release form |  |  |
| Signed code of conduct |  |  |
| Signed confidentiality agreement |  |  |
| Signed photographic waiver |  |  |
| Current police record check/VSS |  |  |
| Attached photocopy of valid driver’s licence if applicable |  |  |
| Attached medical form |  |  |
| Other (Specify) |  |  |
| Other (Specify) |  |  |
| Other (Specify) |  |  |

# Volunteer Police Record Check Letter

To whom it may concern,

Please be advised that \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (print volunteer name) has expressed interest in volunteering for a program with \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (print organization name). Before an individual can be approved to start volunteer activities, they are required to obtain a police record check.

I understand that there may be a reduced fee for police record checks for volunteers who provide a letter of confirmation from the requesting organization. Please consider this letter confirmation that the individual named above is applying for a volunteer position.

The position the individual has applied for requires the following level of police record check:

Police record check (clearance letter)

Vulnerable sector record check (full-search police record check)

Should you have any questions or require further information, please contact: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (print contact name) at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (print phone number).

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

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

# Volunteer Interview Form

Volunteer name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Position title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Interviewer name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

**1. What motivated you to volunteer with our organization?**

**2. What do you know about our organization?**

**3. What do you expect to learn and accomplish from this experience?**

**4. What skills, training or experience would you like to share or develop through this role?**

**5. When and for how long are you available to volunteer?**

**6. In previous volunteer experiences, what did you enjoy the most? What did you enjoy the least?**

**7. Do you have any questions about volunteering with our organization?**

**8. Additional questions:**

**9. Additional comments:**

# Volunteer Reference Check Form

Volunteer name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Reference name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship to volunteer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please rate the applicant on the following qualities (1 = poor, 5 = excellent).

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Reliability | 1 | 2 | 3 | 4 | 5 |
| Ability to perform and complete tasks | 1 | 2 | 3 | 4 | 5 |
| Interpersonal skills with adults | 1 | 2 | 3 | 4 | 5 |
| Interpersonal skills with children | 1 | 2 | 3 | 4 | 5 |
| Problem Solving Skills | 1 | 2 | 3 | 4 | 5 |
| Leadership Skills | 1 | 2 | 3 | 4 | 5 |
| Responsibility | 1 | 2 | 3 | 4 | 5 |
| Exercises Good Judgement | 1 | 2 | 3 | 4 | 5 |
| Acceptance of guidance and supervision | 1 | 2 | 3 | 4 | 5 |

1. How long have you known the applicant? In what capacity?

2. Would you rehire the applicant? Why or why not?

3. How does the applicant work individually?

4. How does the applicant work in a group?

5. Do you have any additional comments about the applicant?

Please indicate the level of confidence you have in this applicant in regard to the volunteer position.

Very-confident Confident Apprehensive Do not know

Recorded by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

# Volunteer Emergency Contacts Form

Volunteer name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Volunteer signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

|  |  |  |
| --- | --- | --- |
| Name | Relationship To Volunteer | Telephone |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

# Volunteer Agreement and Waiver

1. I understand that I will not receive financial compensation or benefits for my time.

2. I acknowledge that participating in volunteer activities may involve certain elements of risk or the chance of an accident. I understand that, as a volunteer, these risks are my responsibility.

3. I will abide by all applicable policies and rules and will follow all instructions of the organization in carrying out my volunteer activities.

4. I will not use facilities, equipment or property owned by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(print organization name) without authorization.

5. I will not use facilities, equipment and property owned by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(print organization name) for personal purposes.

6. Either \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (print organization name) or I may terminate my volunteer activities at any time.

Volunteer signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

# Volunteer Confidentiality Agreement

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (print volunteer name), acknowledge that I am aware that some of the information that I will handle or have access to in the course of my role as a volunteer with \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (print organization name) is confidential.

I will not disclose, communicate or allow to be disclosed directly or indirectly to any person who does not require such information in the course of their duties with \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (print organization name) any private or confidential information whatsoever obtained by me in or about the performance of my duties or by virtue of the position, volunteer placement or employment as an employee with \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (print organization name).

I will not allow any person not entitled by law to such information to inspect or have access to any written statement, departmental record, roll, correspondence, plan, computerized record, document or any other document of a private or confidential nature, and I will conscientiously endeavour to prevent any person not entitled to such information from inspecting or having access to any such confidential information.

Volunteer signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

# Volunteer Evaluation Form

Volunteer Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Volunteer role: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Volunteer supervisor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Areas of success

1)

2)

3)

Areas for Improvement

1)

2)

3)

Additional Support and Training Requested or Advised

Volunteer Supervisor Comments

Volunteer Comments

Volunteer Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Volunteer Supervisor Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# Sample Volunteer Form

Please note this is a draft agreement that should be used as an example only. It is advisable that all contracts be vetted by a lawyer prior to use.

**Volunteer Agreement**

The position of (insert volunteer role title) at the Corporation of the Municipality of and INSERT name of other parties, if applicable, is a volunteer position. This means that, if you accept the role, you donate your time and perform all duties on a voluntary basis.

The Volunteer understands they are under no terms considered an employee, intern or person in training of the Corporation of the Municipality of and INSERT name of other parties, if applicable, .

Furthermore, the Corporation of the Municipality of and INSERT name of other parties, if applicable, acknowledges the Volunteer is not an employee and may provide services at free will. The Volunteer will receive no employee benefits including disability, pay Workers Compensation, or severance pay.

**Services**

The volunteer is able to provide the following services as well as take account of other needs the organization may have:

(insert services)

**Term**

This volunteer agreement shall begin on [Project.StartDate] and will end on [Project.EndDate]. The Volunteer has agreed to provide [Total.Hours] hours per week during the term of this agreement.

**The Volunteer Commits to:**

Acting with honesty, integrity and respect for others.

Acting in an appropriate and responsible manner that upholds the reputation of the Corporation of the Municipality of and INSERT name of other parties, if applicable, .

Participating in any required training and meeting the expectations associated with the Volunteer Service.

Complying with the Corporation of the Municipality of and INSERT name of other parties, if applicable, Non-Discrimination, Non-Harassment and Non-Violence Policy.

Safeguarding confidential and proprietary information that is received in the course of Volunteer Service and ensuring that this information is not communicated or disclosed on social media or to third parties outside the scope of such Service, including at any time after its completion, except with the prior consent of the Corporation of the Municipality of and INSERT name of other parties, if applicable, or if required to do so by law.

Acknowledging that the Corporation of the Municipality of and INSERT name of other parties, if applicable, is the owner of all work products that the Volunteer created or assisted in creating, and waiving – to the extent permitted by law – for the benefit of the the Corporation of the Municipality of and INSERT name of other parties, if applicable, , any rights that the Volunteer may have in the work product.

At the Corporation of the Municipality of and INSERT name of other parties, if applicable, request or upon ceasing to be a Volunteer, returning all property that is in the Volunteer’s possession or control and purging any information that is held on portable storage media that is not required to be returned to the Corporation of the Municipality of and INSERT name of other parties, if applicable, , including but not limited to information on laptops, USB keys and portable hard drives, or in the cloud, within forty-eight hours after providing the Organization with printed copies of such information.

Acknowledging that failure to comply with the terms and conditions of this Agreement may subject the Volunteer to such appropriate measures as may be determined by the Corporation of the Municipality of and INSERT name of other parties, if applicable, including but not limited to, termination of this Agreement.

**Supervision**

The Volunteer should report to [Supervisor.Name] on each day services are provided for instruction and guidance.

(Insert: Summary of any training available, description of limits to do any job or tasks)

**Emergency**

In the event that an emergency should occur while the Volunteer is providing services, the following contact should be notified immediately.

Emergency Contact Name:

Emergency Contact Phone:

**Indemnity and Release**

The Volunteer agrees to protect, hold harmless and indemnify the Corporation of the Municipality of and INSERT name of other parties, if applicable, their employees, servants and agents against all losses, damages, claims, demands and actions arising directly or indirectly in any matter whatsoever in connection with the function or activity and shall pay all costs and expenses with such claim or litigation.

We further agree to assume full financial liability for any damage or loss to the permitted facilities, furniture and equipment when caused by negligent or abusive treatment.

**Assumption of Risk and Waiver**

In consideration of being allowed volunteer for the Corporation of the Municipality of and INSERT name of other parties, the undersigned acknowledges, appreciates, and agrees that:

I hereby freely accept all of the risks (known and unknown) however caused associated with providing volunteer services, whether the risks result in personal injury, property damage, death or some other harm to me.

I willingly agree to comply with the stated and customary terms and conditions for offering volunteer services. If however, I observe any unusual or significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately.

In addition, I acknowledge that I have inquired about the nature of any activity, program or services that I am not completely familiar with and I have been informed of any inherent risks.

As a condition of the Municipality allowing me to perform volunteer services , I (for myself and on behalf of my heirs, next of kin, and personal representatives) agree to waive all claims that I have or may have in the future against the Municipality, its officers, officials, agents and/or employees, other participants, and sponsoring agencies/advertisers for any injury, property damage, financial loss, or any other loss that may result directly or indirectly from my participation in the Program, no matter how this loss is caused (including negligence on the part of the Municipality).

I HAVE READ THIS VOLUNTEER AGREEMENT WHICH CONTAINS A RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

Signature of Volunteer: Date: Name of Volunteer (print):

Signature of Witness: Date:

Name of Witness (print):

If under age 18 at the time of registration:

This is to certify that I, as parent/guardian with legal responsibility for this volunteer, do consent and agree to his/her release as provided above for all the Releasees, and for myself, my heirs, assigns, and next of kin, I release and agree to indemnify the Releasees from any and all liabilities incident to my minor child’s involvement or participation in these programs as provided above.

Signature of Parent/Guardian: Date: Name of Volunteer (print):

Signature of Witness: Date:

Name of Witness (print):

# **Guidelines for Responsible Use of Social Media**

The following sections of the policy provide volunteers with common-sense guidelines and recommendations for using social media responsibly and safely.

1. We want you to help protect our business reputation. Volunteers must not post disparaging or defamatory statements about: a. the Organisation; b. (Insert Your Organisation Name) staff, our clients, volunteers or members past or present; c. suppliers and vendors; and d other affiliates and stakeholders. Volunteers should also avoid social communications that might be misconstrued in a way that could damage our business reputation, even indirectly.
2. Volunteers are personally responsible for what they communicate in social media (as part of their role or on personal sites). Remember that what you publish might be available to be read by the masses including (Insert Your Organisation Name) colleagues, volunteers, future employers and social acquaintances for a long time. Keep this in mind before you post content.
3. A publicity consent form must be obtained prior to posting images or text which may be used on social media.
4. (Insert Your Organisation Name) does not permit tagging of vulnerable adults or anyone under the age of 18.
5. There is no obligation for volunteers to link their personal social media to any (Insert Your Organisation Name) social media.
6. Volunteers are not permitted to set up social media accounts for work purposes without prior consultation with their volunteer supervisor and (insert appropriate person).
7. If you disclose your affiliation as a volunteer of (Insert Your Organisation Name), you must also state that your views do not represent those of the organisation you are volunteering with.  For example, you could state, “the views in this posting do not represent the views of (Insert Your Organisation Name).” You should also ensure that your profile and any content you post are consistent with the image you present to those you work with as part of your volunteering role.
8. You can only use (Insert Your Organisation Name) email address if your volunteering role involves using social media on behalf of the organisation.
9. You are responsible for the security settings of any social media sites you use and should ensure they are set to the appropriate level if you wish to limit who can see your information.
10. Remember that you must respect confidentiality at all times and protect confidential information. You should be mindful of Data Protection issues, if in doubt speak to the (appropriate member of staff). Confidential information includes things such as unpublished details about our work, details of current projects, future projects, financial information or information held on our supporters, staff or volunteers.
11. Avoid posting comments about sensitive (Insert Your Organisation Name) related topics, such as our performance. Even if you make it clear that your views do not represent those of our charity, your comments could still damage our reputation.
12. If you are uncertain or concerned about the appropriateness of any statement or posting, refrain from making the communication until you discuss it with your volunteer supervisor.
13. If you see content in social media that disparages or reflects poorly on (Insert Your Organisation Name) or our stakeholders, you should report it to your volunteer supervisor and/or the Communications Manager.  All volunteers are responsible for protecting our reputation.
14. The contact details of business contacts made during the course of your volunteering are regarded as our confidential information, and as such you will be required to delete all such details from your personal social networking accounts, should you finish volunteering with (Insert Your Organisation Name).
15. Contact details of volunteers are subject to data protection.  Staff are not permitted to access or store information on volunteers that would breach data protection.

# Sample Volunteer Media Agreement

In consideration of the opportunity afforded me to participate as a volunteer for (Insert Your Organisation Name), I agree to the following media policies:

1. Media Authorization. I consent to the unrestricted use by (Insert Your Organisation Name), or any person authorized by (Insert Your Organisation Name), in any medium, including the Internet, of any photographs, recordings, interviews, videotapes, film, or similar visual or auditory recordings of me created in connection with my participation as a volunteer. (Insert Your Organisation Name) staff will attempt to limit use of your image upon request on a case-by-case basis. This accommodation by (Insert Your Organisation Name) is not an agreement to do so on an ongoing basis and (Insert Your Organisation Name) is not under any obligation to delete or retract published images.

2. Social Media. Inappropriate use of social media can pose risks to our confidential and proprietary information and reputation and can jeopardize our compliance with legal obligations. As a volunteer with (Insert Your Organisation Name), I agree to the following social media policy. This policy covers all forms of social media including but not limited to: Facebook, YouTube, X (formerly Twitter), Instagram, and all other social networking sites, and all other internet postings, including blogs. This policy applies regardless of whether the social media is accessed using (Insert Your Organisation Name) IT facilities and equipment or equipment belonging to volunteers. If this policy is breached in any way, I agree to delete my posting immediately upon request by (Insert Your Organisation Name).

**Social Media Volunteer Policy**

Volunteers may not post disparaging or defamatory statements about: (Insert Your Organisation Name) staff, clients, volunteers, suppliers, board of directors, vendors or affiliates and stakeholders past or present.

Volunteers should not post social communications that might be misconstrued in a way that could damage (Insert Your Organisation Name) business reputation, even indirectly.

Volunteers may not take or post photos or videos of or include names or identification information about any (Insert Your Organisation Name) clients. Any social media posts which include photos, videos or names of volunteers, staff or other affiliates of (Insert Your Organisation Name) may only be done with the permission of those individuals. Any such posts related to volunteer service at (Insert Your Organisation Name), may only include individuals over the age of 18.

Volunteers agree to discuss any concerns about (Insert Your Organisation Name) operations, clients, staff, volunteers, programs or policies with (Insert Your Organisation Name) staff, management or board of directors as appropriate. Any grievances or concerns shall be handled in person, through email or other professional, private forms of two-way communication. Volunteers agree that concerns or grievances shall not be posted on social media.

Volunteers agree to report any social media content that reflects poorly on (Insert Your Organisation Name) to an (Insert Your Organisation Name) director.

Volunteers may be asked periodically to assist in spreading certain (Insert Your Organisation Name) communications through their social media outlets. This is not a requirement for volunteering. Any such requests should be posted in adherence to the other social media guidelines in this policy.

Volunteers are not required to link to any (Insert Your Organisation Name) social media as part of their volunteer commitment.

Volunteers are permitted to use social media occasionally on their personal devices during their volunteer shift on (Insert Your Organisation Name) premises if it does not interfere with their volunteer duties and is not in any way inappropriate or unprofessional or otherwise a violation of this social media policy. Volunteers should not use (Insert Your Organisation Name) computers or IT resources to check private emails or post to social media during their volunteer shift.

This Agreement will be effective as of the date (Insert the Date) I have read, understand, and accept this Agreement and have been given adequate time to review it and ask questions.

Volunteer’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Printed Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# Volunteer Letter to Insurance Company Personal Vehicle Use

Dear Sir/Madam,

My name is \_\_\_\_\_(insert full name)\_\_\_\_\_\_\_\_, my policy number is \_\_\_\_\_\_. I am writing you today to inform you of a slight change in the usage of my vehicle as I understand it is a requirement of the insurance contract for me to do so.

I would like to use my automobile in my volunteer duties with the \_\_\_\_\_\_\_(insert organization name)\_\_\_\_\_\_. The \_\_\_\_\_\_\_(insert organization name)\_\_\_\_\_\_, is a non-profit organization in our community and offers transportation for elderly, partially disabled and rural residents who otherwise would have no access to essential services.

The vehicle usage is expected to be 2-3 times per week and he radius of travel is within 100km of my primary residence. As the owner of the vehicle and a volunteer worker, I will not be receiving any form of wage, compensation or reimbursement for fuel, expenses, or time but in a rare occurrence may receive a small donation from the individual who is accessing the service. Ultimately, I would ask that my insurance company please permit this use of the insured automobile for zero additional premium, if not a very small fee.

Please confirm in writing either through email, standard letter or certificate of insurance that this usage is permissible.

Thank you in advance.

Kind Regards,