



Brisbane Village Helping Hands Volunteer Confidentiality Agreement and Liability Waiver

By submitting my application to become a Brisbane Village Helping Hands (BVHH) Volunteer I affirm that the facts I have provided to BVHH are true and complete. Further, I agree to the following:

1. I agree to conform to all BVHH policies, rules and procedures.
2. I understand that if I am accepted as a Volunteer, any false statements, omission or other misrepresentation made by me on this application may result in immediate termination of my service as a Volunteer.
3. I will offer my time without monetary compensation.
4. I authorize BVHH to contact my references and I agree to submit to a background check through Verified Volunteers that will include my driving record and any criminal record. I understand that all information collected in my background check will be kept confidential. Any references contacted have my permission to provide their candid evaluation of my suitability for the described volunteer work.
5. As consideration for volunteering for BVHH, I agree to indemnify BVHH against and hold it harmless from all loss and expenses arising out of any act, neglect or fault on my part in the course of volunteering. I further agree that, I, my assignees, heirs and legal representatives will not make any claim against or sue BVHH, its officers, directors, employees, agents or contractors for injury or damage resulting from my act, neglect or fault as a volunteer. **I hereby release and discharge Brisbane Village Helping Hands and its officers, directors, employees, agents and contractors from all actions, claims or demands that I, my heirs and legal representative now have, or may have in the future, and for injury or damage resulting from my volunteering for Brisbane Village Helping Hands. I further understand that, if I am injured in the course of my volunteer work for Brisbane Village Helping Hands, I will not be covered by any workers' compensation.**
6. I acknowledge that I understand the health risks associated with participation in volunteer-provided transportation and other BVHH services, which include potential exposure to a communicable disease such as COVID-19, a virus that may cause serious illness and may lead to death. I understand and agree that BVHH is not liable for any illness or death that may occur as a result of my participation in BVHH services and activities. As a condition of my participating in BVHH services and activities, I, on behalf of myself and my executors and assigns, release and forever discharge BVHH and its members, volunteers, agents, officers and employees from any claims, demands or damages arising out of or related to my actual or potential exposure to a communicable disease in connection with my provision or acceptance of BVHH services.

7. As a BVHH, I understand that it is imperative to protect the confidentiality of all information pertaining to any Village Member, non-member or other Volunteer or client associated with BVHH, and that any unauthorized possession, use, copying, reading or disclosure of applicable records, ledgers or files is prohibited and grounds for immediate termination of my service as a Volunteer.

Name _____

Signature _____ Date _____

Your signature confirms that you understand and accept the terms of the Volunteer Confidentiality Agreement and Liability Waiver set forth above. You also understand that BVHH is not obligated to use your services and if you are offered a Volunteer position you are not obligated to accept it. The information you have submitted will not be given to any other parties without your permission.