

CONFIDENTIAL



GATEWAY OF HOPE
PROVISIONAL VOLUNTEER FORM & RELEASE

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www.gatewayofhope.ca

NAME: _____

DATE: _____

PHONE #: _____

In the event that an individual would like to volunteer in a temporary position, they must complete the Provisional Volunteer Form and return to the Volunteer Coordinator.

This policy is not intended to supersede or replace the volunteer application and interview process but rather to extend a volunteer opportunity under irregular circumstances or to groups.

Volunteering in circumstances that are regular or subsequent must follow the existing volunteer process, policy, and procedure.

I, _____, agree and understand that I am volunteering under temporary circumstances and will complete the full volunteer application procedure if I desire to volunteer again under regular circumstances at the Salvation Army Gateway of Hope.

Volunteer Signature

All Provisional Volunteer & Release Forms must be submitted to the Volunteer & Project Coordinator the following business day.

SECTION A: CONFIDENTIALITY STATEMENT

I, the undersigned, do willingly promise to hold IN CONFIDENCE all matters that come to my attention during my volunteer position at The Salvation Army Gateway of Hope including materials from and about clients and matters regarding finance and any other material considered confidential.

I will respect the privacy of the people whom I serve and work with, and will confer appropriately with those designated as my supervisors and/or administrators.

Further, I will respect in a responsible and discretionary manner all information gained in the course of my volunteer time. I understand that any breach of confidentiality on my part may result in disciplinary action, including dismissal from my volunteer position.

Volunteer Signature

Witness Signature

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SECTION B: PHOTOGRAPH, VIDEO AND AUDIO FOOTAGE RELEASE

I, _____, hereby authorize The Governing Council of The Salvation Army in Canada, The Salvation Army Canada and Bermuda Territory and all associated and related charities (collectively referred to throughout the remainder of this document as the "The Salvation Army") to use photographs, video and audio footage of me or my child taken at The Salvation Army Gateway of Hope, or an event hosted by The Gateway of Hope to be used by The Salvation Army for any and all identification badges for volunteers, and/or and all marketing, public relations and promotional purposes, which they may, in their sole and absolute discretion, deem appropriate.

Volunteer Signature

Child's name (where applicable)

I allow my first name to be used in media _____
(Initials)

I allow my child's first name to be used in media _____
(Initials)

SECTION C: WAIVER OF LIABILITY

The Salvation Army agrees to treat all volunteers with dignity and respect, having due regard for their personal safety and their personal property while they are serving as volunteers. To that end, The Salvation Army will take reasonable steps necessary to ensure a safe and secure working environment for all individuals, including volunteers. While volunteers will not knowingly be placed in unsafe situations or exposed to unnecessary risk, it is recognized that accidents or losses occasionally happen which cannot be attributed to any fault on the part of any one individual or organization.

The purpose of this document is to release The Salvation Army from liability for accidents, injuries, losses and damage which may occur in the course of providing volunteer services, where such accidents, injuries, losses or damage are not caused by negligent acts or omissions on the part of The Salvation Army.

As a volunteer participant in the delivery of Salvation Army programs and services, I agree to the following:

1. The Salvation Army will not be required to compensate me for any harm or loss suffered as a result of my participation in the provision of volunteer services, whether that be harm such as illness, injury or death, or loss of or damage to personal property unless such harm or loss is caused by negligent acts or omissions on the part of The Salvation Army or those for whom it is legally responsible.
2. I relinquish any right I might have to claim compensation from The Salvation Army for any harm or loss suffered by me in connection with the provision of volunteer services except if such harm is caused by negligent acts or omissions of The Salvation Army or those for whom it is legally responsible.
3. Any reference to The Salvation Army in this document shall include The Salvation Army Canada and Bermuda Territory, The Governing Council of The Salvation Army in Canada, and all associated charities, divisions and unincorporated associations, as well as all officers, employees and volunteers of any of them.

I fully understand and agree to the terms set out in this document and I am signing it voluntarily.

Volunteer Signature

Witness Signature