

Volunteer Agreement

Thank you for giving your time to neighbors across Laurens County. This agreement explains what you can expect from The Outreach Foundation and what we ask of you. It is not an employment contract. Please read both pages, complete the volunteer form, and sign at the bottom of page 2.

1. YOUR ROLE

You are giving your time freely. Volunteering with The Outreach Foundation is unpaid, and you will not be treated as an employee or receive wages or benefits. Out-of-pocket costs approved in advance may be reimbursed under our reimbursement policy. You may stop volunteering at any time, and we may end a volunteer assignment at any time.

3. CONFIDENTIALITY

Families who come to us trust us with their names, addresses and circumstances. Keep anything you learn about the people we serve private, during your time with us and after. Do not share it, post it online, or photograph the people we serve without their permission.

5. EMERGENCY CARE

If you are hurt or become ill while volunteering and cannot speak for yourself, you allow us to arrange first aid and emergency medical care and to call the emergency contact you list on page 2. Any medical costs remain your own.

2. CONDUCT AND SAFETY

Treat every neighbor, donor and fellow volunteer with respect, without discrimination. Follow the directions of the coordinator on site, use safe lifting and food-handling practices, and decline any task you do not feel able to do safely. No alcohol or illegal drugs while volunteering. Report any injury or incident right away.

4. RISKS AND RELEASE

Volunteer work can involve lifting furniture, sorting donations, handling food, and being outdoors or on the road. You take part voluntarily and accept these ordinary risks. To the fullest extent South Carolina law allows, you release The Outreach Foundation, its directors and volunteers from claims for injury or loss arising from your volunteer work, except those caused by gross negligence or willful misconduct.

6. PHOTOS AND MEDIA

We may take photos or video at drives and events to share our work on our website, social media and printed materials. Mark your choice on page 2. You can change your mind at any time by telling us in writing.



Volunteers under 18: a parent or legal guardian must read this agreement and sign page 2 before you begin volunteering.

THE OUTREACH FOUNDATION

Clinton, South Carolina · theoutreachfoundation.net

Volunteer Information Form

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SECTION 1 • VOLUNTEER INFORMATION

Please print clearly.

FIRST NAME	LAST NAME		
EMAIL	PHONE NUMBER	ZIP CODE	
EMERGENCY CONTACT NAME	RELATIONSHIP	EMERGENCY CONTACT PHONE	

SECTION 2 • AVAILABILITY

Check each day you can help and write your hours, for example 1:00 PM to 5:00 PM. Eastern time.

DAY	AVAILABLE	FROM	TO
Sunday	☐		
Monday	☐		
Tuesday	☐		
Wednesday	☐		
Thursday	☐		
Friday	☐		
Saturday	☐		

SECTION 3 • SKILLS AND INTERESTS

- ☐ Coat and clothing drives ☐ Furniture pickup and delivery ☐ Food recovery ☐ Sorting and inventory
- ☐ Events and outreach ☐ Driving with my own vehicle ☐ Website and social media ☐ Other: _____

OTHER SKILLS, INTERESTS OR NOTES

SECTION 4 • ACKNOWLEDGMENT AND SIGNATURE

Photos and media: ☐ You may use photos of me ☐ Please do not use photos of me

By signing below, I confirm that I have read and received both pages of this Volunteer Agreement, that I understand them, and that I agree to follow them.

VOLUNTEER SIGNATURE	PRINTED NAME	DATE
PARENT OR GUARDIAN SIGNATURE (if under 18)	PRINTED NAME	DATE