



Part Time Confidentiality and Liability Agreement

This is to advise that I am volunteering my services to Goodwill Easter Seals Miami Valley. I understand that Goodwill Easter Seals Miami Valley will have no liability of any kind while I am volunteering and that I will receive no compensation of any kind. I, as the volunteer, agree that I will hold strictly confidential all information obtained during the course of my time with Goodwill Easter Seals Miami Valley.

I further understand that such duties as I perform will be directed by Goodwill Easter Seals Miami Valley supervisors/managers or designated employees and my performance must be in compliance with their instructions.

Goodwill Easter Seals Miami Valley's policies and procedures are applicable to all volunteers. The safety procedures must be followed.

This agreement is made and agreed to by Goodwill Easter Seals Miami Valley and the Volunteer. I, as the volunteer, agree that I will hold strictly confidential all information obtained during the course of my time with Goodwill Easter Seals Miami Valley.

My signature indicates agreement with the above Volunteer, Confidentiality and Liability Agreement.

Printed Name _____

Address _____

City, State, Zip _____

Phone _____

Email _____

Volunteer Signature Date

I will allow photographs of myself to be used by Goodwill Easter Seals Miami Valley.
Yes _____ No _____ Please initial your answer

FOR VOLUNTEERS UNDER THE AGE OF 18 ONLY

I will allow photographs of my son or daughter to be used by Goodwill Easter Seals Miami Valley.
Yes _____ No _____ Please initial your answer.

Parent/Guardian PRINTED Date

Parent or Guardian Signature