



# Inter-Faith Food Shuttle

We feed. We teach. We grow.

THANK YOU FOR VOLUNTEERING!

**Contact Information** (\*ONLY Name and Signature required if form was completed online)

Name	Birth Day
Address	
City, State, Zip	
Phone	Email
Emergency Contact	Emergency Contact Phone

**Employer** Many companies offer grants or financial support based on employee volunteering. Providing this information helps us with funding requests.

Company	Phone
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**Group Affiliation** If you are participating as part of a group, company, or organization, please enter your group and group leader's name below.

Group Name
Group Leader
Group Leader Phone/E-mail

**Select which volunteer opportunity you're participating in today, and any others you're interested in!**

If you are over 18, you will receive information on your selected volunteer opportunities, our monthly "Food Mover" newsletter, and an occasional organizational announcement or request to support our programs financially. You may unsubscribe at any time at the bottom of any e-mail, and we will never sell or use your information with an outside third party.

**Volunteer Opportunities**

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Driver/Drivers Assistant | <input type="checkbox"/> One Time Special Events    | <input type="checkbox"/> Grocery Bags for Seniors |
| <input type="checkbox"/> Field Gleaning           | <input type="checkbox"/> Plant-A-Row for the Hungry | <input type="checkbox"/> Field Gleaning           |
| <input type="checkbox"/> Warehouse                | <input type="checkbox"/> Front Desk                 | <input type="checkbox"/> Urban Agriculture        |
| <input type="checkbox"/> Teaching Farm            | <input type="checkbox"/> Backpack Buddies           |   |
| <input type="checkbox"/> Nutrition Education      | <input type="checkbox"/> Mobile Markets             |   |

**Legal Disclosures**

IFFS reserves the right to conduct reference checks and a criminal history background check on volunteers. I understand that once having been accepted, any information or data which I have given, that is false or misleading, can or may result in my dismissal as a volunteer. I understand that all Inter-Faith Food Shuttle volunteers do so at their own risk. I therefore do release and indemnify, defend and hold harmless, the Inter-Faith Food Shuttle or any other partnering entity from and against all claims, actions, suits, or proceedings of any kind or nature arising as the result of my actions while I volunteer with the Shuttle. By signing below I understand that while volunteering, the media and/or IFFS may take photos, video, or audio of volunteers in action. I give permission to Inter-Faith Food Shuttle to use my image/voice in news coverage and promotional material.

**WARNING** Under North Carolina law, there is no liability for an injury to or death of a participant in an agritourism activity conducted at this agritourism location if such injury or death results from the inherent risks of the agritourism activity. Inherent risks of agritourism activities include, among others, risks of injury inherent to land, equipment, and animals, as well as the potential for you to act in a negligent manner that may contribute to your injury or death. You are assuming the risk of participating in this agritourism activity.

Volunteer Signature \_\_\_\_\_ date \_\_\_\_\_

Parent/Guardian Signature (if under age 18) \_\_\_\_\_ date \_\_\_\_\_