



Office Use Only	
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<input type="checkbox"/> DonorP	<input type="checkbox"/> DonorP
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**Westmoreland County Food Bank, Inc.  
Guidelines for Warehouse, Office and Senior  
Food Box**

**PLEASE PRINT**

Volunteer's Name \_\_\_\_\_ Phone \_\_\_\_\_

Organization/Group \_\_\_\_\_  Regular Volunteer  RSVP Program  Court-ordered

Email \_\_\_\_\_

Home Address \_\_\_\_\_

Street

City

Zip Code

- I have read and agree to follow the policies and procedures of Westmoreland Food Bank, which are posted on our website and at all volunteer activity sites.
- I agree and understand that in my capacity as a volunteer, I cannot disseminate any information about clients that are served by Westmoreland Food Bank or donors that support Westmoreland Food Bank.
- Under no circumstances are volunteers under the age of 14 permitted to work in the warehouse, due to possible hazards and Child Labor Laws. Volunteers with special needs or under 14 years of age are permitted to work in our "safe" room, but they must be accompanied by an adult. They are not permitted to assist in unloading the truck when a lift gate is being used. Only Westmoreland Food Bank personnel are permitted to operate the lift gate.
- Make sure you are **physically capable** of doing the labor required, when offering to volunteer. There are some positions not so physically challenging available upon request.
- As a safety precaution, **open-toed shoes are not permitted**. You must wear appropriate attire, suitable for public viewing. Absolutely, no bare mid-drifts, super short shorts, or any type of seductive clothing allowed. To ensure your comfort, it is advisable to dress in layers, especially in the winter.
- The smoking of any tobacco product (cigar, cigarette, pipe or electronic smoking device) and/or the use of oral tobacco products is prohibited on Westmoreland Food Bank facilities, property or in any company vehicle.
- Westmoreland Food Bank assumes no responsibility for damage to or loss of personal property. Do not volunteer if you are ill. While handling food, please follow food safety procedures and wash hands accordingly. Follow fire safety procedures as stated during orientation. Report any injuries to Westmoreland Food Bank staff.
- Volunteers are not permitted to take any products from the warehouse or its partner agencies under any circumstances without prior approval from Westmoreland Food Bank. Any volunteer doing so can be terminated, or even prosecuted by the law.
- If you have arranged for coverage in the local press or plan to have a photographer present, please let us know about this as soon as possible prior to your scheduled date. We also request that you provide us with a copy of any kind of press release regarding your volunteering here, prior to its release to the media.
- Please be flexible. There may be times, when shipments might be delayed, sometimes outside of our control and your volunteer session might need to be postponed or extended. You will be notified, as soon as possible. Please make every effort not to cancel. However, if you need to cancel please contact the Director of Volunteers as soon as possible.
- It is the right of Westmoreland Food Bank to terminate any volunteer for inappropriate behavior or dress, violation of warehouse rules, or any action, which prevents us from meeting our goals.

I have read and understand the above guidelines: X \_\_\_\_\_

Volunteer's Signature

\_\_\_\_\_ Date

**Parental Consent required if volunteer is under age 18**

\_\_\_\_\_ has my permission to participate as a volunteer with Westmoreland Food Bank.

(Print name of minor)

Name (print): \_\_\_\_\_ Relationship to Child \_\_\_\_\_ Age of Child \_\_\_\_\_

Phone number: \_\_\_\_\_

I have read and understand the above guidelines: X \_\_\_\_\_

Signature of Parent/Legal Guardian

\_\_\_\_\_ Date

If I cannot be reached in the event of an emergency, the following person is authorized to act on my behalf:

Name (print) \_\_\_\_\_ Phone \_\_\_\_\_

**Please review these guidelines carefully, then sign and return this form to Director of Volunteers**

**Westmoreland Food  
Bank 100 Devonshire  
Drive  
Delmont PA 15626**

# Volunteer Waiver & Release of Liability

Please read carefully before signing

In consideration of being permitted to participate in events and volunteer activities through the Westmoreland Food Bank, I acknowledge and agree that:

1. I am volunteering to assist the Westmoreland Food Bank in its events and volunteer activities, including, but not limited to warehouse or office help, packing of food boxes, Fresh Express distributions, food pantry distribution, food drives or gleaning programs, collecting and/or transporting donated food.
2. I acknowledge that participation as a volunteer with the Westmoreland Food Bank and in its related events and volunteer activities carries with it the risk of death, serious injury, disability and/or property loss. I knowingly and freely assume all risks from my participation in the events and volunteer activities.
3. **I hereby release and discharge the Westmoreland County Food Bank, Inc., its partner and member agencies, donors, sponsors, the owners and lessors of premises used for the events and volunteer activities, and each of their officers, directors, members, employees, agents, representatives, heirs, successors and assigns (hereinafter collectively referred to as Releasees) from any and all liability, claims or causes of action, of whatever kind, foreseen or unforeseen, including, but not limited to those for personal injury, death, disability, property damage or other harm, arising out of or in any way connected with my participation in the events and volunteer activities, including those caused by the negligent acts or omissions of the Releasees.**
4. I further agree to indemnify defend and hold harmless Releasees from any and all claims, causes of action, damages or liabilities of any kind, including the expenses of litigation and attorney fees, arising out of or in any way connected with my participation in the events and volunteer activities.
5. I understand and agree that this Volunteer Waiver and Release of Liability is binding on my next of kin, heirs, executors, administrators, successors, assigns, personal and legal representatives.

**I have read the foregoing Volunteer Waiver and Release of Liability, fully understand its terms, understand that I have given up substantial rights by signing it, and am voluntarily signing below, intending to be legally bound.**

\_\_\_\_\_  
Signature of Volunteer

Date:\_\_\_\_\_

\_\_\_\_\_  
Print Name of Volunteer

**If volunteer is under 18, a parent or guardian must also sign this Volunteer Waiver and Release of Liability.**

I, as parent or guardian with legal responsibility for the volunteer, consent and agree to the terms and conditions as stated in the Volunteer Waiver and Release of Liability as provided above, and for myself, my next of kin, heirs, executors, administrators, successors, assigns, personal and legal representatives, hereby release and agree to indemnify and hold harmless the Releasees from any and all claims and liabilities arising out of or in any way connected with my minor child or ward's participation in the events and volunteer activities as provided above, even if arising from the negligent acts or omissions of the Releasees.

Name:\_\_\_\_\_Relationship to Child:\_\_\_\_\_Age of Child\_\_\_\_\_

Signature of Parent/Legal Guardian:\_\_\_\_\_Date:\_\_\_\_\_

# **COVID-19 Waiver and Release of Liability**

**Please read carefully before signing**

Keeping with the Westmoreland Food Bank's safety culture, we require all volunteers to read and adhere to all of the following guidelines and precautions.

**Given the ongoing concerns and spread of COVID-19 and its variants, volunteers are required to read and execute this COVID-19 Waiver and Release of Liability (the Waiver) carefully.**

COVID-19 and its variants are extremely contagious and are spread mainly from person-to-person contact. While the Westmoreland Food Bank has implemented preventative measures to help reduce the spread of COVID-19 and its variants, the Westmoreland Food Bank cannot guarantee that its employees, volunteers, partners, or those in attendance at the Food Bank warehouse, partner agencies, volunteer events or activities will not become infected with COVID-19 or its variants.

1. In light of the ongoing concern of COVID-19 and its variants, individuals who fall within any of the categories set forth below are not permitted to participate in Westmoreland Food Bank volunteer events or activities. By attending a Westmoreland Food Bank volunteer event or activity, I certify that I do not fall into any of the following categories:
  - a. Individuals who currently or within the past fourteen (14) days have experienced any symptoms associated with COVID-19 or its variants, including fever or chills, cough, shortness of breath, fatigue, muscle or body aches, headache, new loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting, or diarrhea; or
  - b. Individuals who have traveled in the past fourteen (14) days either internationally or to a community in the U.S. that has experienced or is experiencing sustained community spread of COVID-19 or its variants; or
  - c. Individuals who believe that they may have been exposed to a confirmed or suspected case of COVID-19 or the variants or have been diagnosed with COVID-19 or its variants and are not yet cleared as non-contagious by state or local public health authorities or their health care provider responsible for their treatment.
  - d. Individuals who cared for or had close contact (within 6 feet of an infected person for at least 15 minutes) with someone with symptoms of COVID-19 or its variants, tested for COVID-19 or its variants, or diagnosed with COVID-19 or its variants.
2. I acknowledge that my participation as a volunteer with the Westmoreland Food Bank is voluntary and that I derive a personal benefit by virtue of my volunteering with the Westmoreland Food Bank in its events and activities.
3. I further acknowledge that given the COVID-19 outbreak and its variants, the risk of contracting COVID-19 and its variants is always present and cannot be eliminated.
4. I further acknowledge that while participating in volunteer events and activities at the Westmoreland Food Bank, that I may not always be able to maintain social distancing and that I may be in close proximity with individuals who could potentially be infected with COVID-19 or the variants.
5. I knowingly and freely assume all risks, including serious illness and death, of contracting COVID-19 and the variants from my participation in volunteer events and activities at the Westmoreland Food Bank.

## **RELEASE AND WAIVER**

WITH KNOWLEDGE OF THESE RISKS, I HEREBY RELEASE, WAIVE AND FOREVER DISCHARGE THE WESTMORELAND COUNTY FOOD BANK, INC., ITS PARTNERS AND MEMBER AGENCIES, DONORS, AND SPONSORS, AND EACH OF THEIR OFFICERS, DIRECTORS, MEMBERS, EMPLOYEES, AGENTS, REPRESENTATIVES, HEIRS, SUCCESSORS, ATTORNEYS AND ASSIGNS (THE "RELEASED PARTIES"), FROM ANY AND ALL LIABILITY, CLAIMS OR CAUSES OF ACTIONS, OF WHATEVER KIND, FORESEEN OR UNFORESEEN, INCLUDING BUT NOT LIMITED TO THOSE FOR PERSONAL INJURY, DEATH, DISABILITY, PROPERTY DAMAGE OR OTHER HARM, ARISING OUT OF OR IN ANY WAY CONNECTED WITH MY PARTICIPATION IN THE EVENTS OR VOLUNTEER ACTIVITIES AT THE WESTMORELAND FOOD BANK AND/OR **RELATED TO COVID-19 CONTRACTED DURING THE TIME THAT I AM VOLUNTEERING WITH WESTMORELAND FOOD BANK**, EVEN IF ARISING FROM THE NEGLIGENT ACTS OR OMISSIONS OF THE RELEASED PARTIES.

I understand and agree that this COVID-19 Volunteer Waiver and Release of Liability is binding on my next of kin, heirs, executors, administrators, successors, assigns, personal and legal representatives.

I have read the foregoing COVID-19 Volunteer Waiver and Release of Liability, fully understand its terms, understand that I have given up substantial rights by signing it, and I am voluntarily signing below, intending to be legally bound.

\_\_\_\_\_  
Signature of Volunteer

Date:\_\_\_\_\_

\_\_\_\_\_  
Print Name of Volunteer

**If volunteer is under 18, a parent or guardian must also sign this COVID-19 Volunteer Waiver and Release of Liability.**

I, as parent or guardian with legal responsibility for the volunteer, consent and agree to the terms and conditions as stated in the COVID-19 Volunteer Waiver and Release of Liability as provided above, and for myself, my next of kin, heirs, executors, administrators, successors, assigns, personal and legal representatives, hereby release and agree to indemnify and hold harmless the Releasees from any and all claims and liabilities arising out of or in any way connected with my minor child or ward's participation in the events and volunteer activities as provided above, even if arising from the negligent acts or omissions of the Releasees.

Name:\_\_\_\_\_Relationship to Child:\_\_\_\_\_

Signature of Parent/Legal Guardian:\_\_\_\_\_Date:\_\_\_\_\_

## Photo Release and Consent Form

*Individuals who donate to, volunteer for, or receive food from **Westmoreland County Food Bank** are occasionally asked to be part of Westmoreland County Food Bank publicity, publications, and/or public relations activities. In order to guarantee personal privacy and ensure your agreement to participate, Westmoreland County Food Bank asks that you sign this form.*

*Your signature indicates approval for your name, picture, verbal statements or portraits (video or still) to appear in Westmoreland County Food Bank publicity. Westmoreland County Food Bank may use the pictures and/or videos in subsequent years.*

I authorize Westmoreland County Food Bank to use my photograph in any or all of its publicity. Said photographs shall remain and be the property of Westmoreland County Food Bank. They may be used with or without my name or using my initials of a fictitious name.

I, also, agree I will not be compensated for these pictures and my consent and release have been given without coercion or duress.

I hereby release Westmoreland County Food Bank, Inc. and any of its associated or affiliated services, their directors, officers, agencies and employees from all claims of any kind on account of such use.

I have read the foregoing and fully understand the contents.

Please sign below, giving your permission to be photographed.

Printed Name \_\_\_\_\_

Signature X \_\_\_\_\_

Effective Date of Agreement \_\_\_\_\_ Pantry # \_\_\_\_\_ (optional)

If a person appearing is a minor (under 18 years of age), a parent or legal guardian must sign the form as well.

Parent/Legal Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

## DIRECTIONS TO WESTMORELAND COUNTY FOOD BANK

- From Greensburg, take Route 66 North
  - Make a left onto 22 West (following signs for Murrysville)
  - At the first Traffic Light on 22 (there will be a Get-Go gas station on your right), make a left onto Cloverleaf Drive.
  - Make first left onto Devonshire Drive. Westmoreland County Food Bank will be at the corner of Cloverleaf and Devonshire. It is a large green building.
  - Make a right into the Food Bank lot.
- 
- From Murrysville, take Route 22 E to just before Delmont area. At Get Go (which is on your left) make a right onto Cloverleaf Drive.
  - Make first left onto Devonshire Drive. Westmoreland County Food Bank will be at the corner of Cloverleaf and Devonshire. It is a large green building.
  - Make a right into the Food Bank lot.
- 
- From the North, take Route 66 S to Route 22 W in Delmont.
  - At first light at Get Go make a left onto Cloverleaf Drive.
  - Make first left onto Devonshire Drive. Westmoreland County Food Bank will be at the corner of Cloverleaf and Devonshire. It is a large green building.
  - Make a right into the Food Bank lot.

***Please park and enter through the double green doors on left side of building. Follow “Volunteer Registration” signs and ring bell on right side of office door.***

*If there is a driving advisory due to inclement weather conditions, (snow, wind, etc.) please call 724- 468-8660 x31 for an update about any postponement or cancellation after 7 a.m. the morning of your activity.*

*If you need to cancel or have any questions about this opportunity, please do not hesitate to contact us.*