

WAIVER AND REALEASE OF LIABILITY AND ACCEPTANCE OF RISK

I hereby release, indemnify, and hold harmless University District Food Bank, its officers, directors and employees, and the organizers, sponsors, and supervisors from all liability in connection with any injury or risk of exposure I may sustain (including any injury by negligence) in conjunction with activities inside or outside of University District Food Bank.

Volunteer code of conduct acknowledgement

I have read and agree to follow the volunteer code of conduct, and all volunteer policies related to volunteering with the University District Food Bank. These agreements can be found here: https://www.udistrictfoodbank.org/volunteerconductagreement/

I acknowledge that I have read and understand the volunteer code of conduct and agree to uphold them at all times University District Food Bank.

I agree to all the above agreements:

Volunteer Name	(printed):	Signature:
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Date: _____

Emergency Contact (email or phone): _____

If under 18:

Parent if under 18 I (name of parent/guardian) ______ hereby give permission for the above minor/child to volunteer at the University District Food Bank and accept all the risks and responsibilities outlined in this document on their behalf.

Date: _____

Signature: ______