



VOLUNTEER APPLICATION FOR PANDEMIC RELIEF SERVICES

The Salvation Army is committed to protecting the health of our staff, volunteers, and all those we serve. Due to widespread community transmission of the CORVID-19 virus, please read and affirm by checking each box that you meet the following conditions BEFORE volunteering.

- You are at least 18 years of age.
- You have **NOT** recently traveled abroad or to any highly impacted part of the United States.
- You feel healthy and have **NOT** been exposed to anyone who may have contracted COVID-19.
- You are **NOT** part of a high-risk group for developing critical conditions.
- You are willing to follow local health guidelines issued to prevent the spread of COVID-19 including maintaining a social distancing of at least 6 feet and wearing a protective mask.

First Name	Middle Initial	Last	Suffix
Address (Street, City, State, Zip Code)			
E-mail		Preferred Phone Number	
Occupation (or Current Employer)			
Emergency Contact Information			
Name		Relationship	
Preferred Phone		Email	

To help ensure that you have the best possible volunteer experience, please answer the following questions. Your answers to these questions will not disqualify you from volunteering.

- Yes No I can lift 50 pounds or more.
- Yes No I can be on my feet for approximately 8 hours a day
- Yes No I can engage in service delivery in extreme heat, cold and wet climate conditions.
- Yes No I can handle working in a highly stressful environment.
- Yes No I am comfortable helping persons who are emotionally & psychologically distraught.
- Yes No Have you ever been convicted of a felony? *Note that a conviction will not necessarily disqualify you from serving*
- Yes No Do you have a valid drivers' license?
- Yes No Are you fluent in any language other than English? If yes, list those languages:

A background investigation is required for all volunteers who affiliate with The Salvation Army and/or assist vulnerable populations. Are you willing to authorize a background investigation check? Checking "Yes" does not constitute authorization to conduct a background investigation; doing so only indicates you are willing to sign the required authorization form. Yes No

Volunteer Release and Waiver of Liability

This release and Waiver of Liability (the "Release") executed on this ___ day of _____ by _____ (the "Volunteer") in favor of THE SALVATION ARMY, a corporation organized and existing under the laws of the State of _____, its members, trustees, directors, officers, employees, volunteers and agents (collectively, "The Salvation Army").

I, The Volunteer, desire to volunteer with The Salvation Army to provide emergency disaster relief or related services and engage in the activities related to offering these services. I understand that the activities may include, but are not limited to, travel to disaster sites in the United States; transportation in commercial and Salvation Army-owned vehicles; moving and lifting heavy objects; cooking and serving food; and working and inhabiting environments where I may be exposed to infectious diseases or that may be without power, sanitation, or are otherwise damaged by a disaster event.

I hereby freely and voluntarily, without duress, execute the Release under the following terms:

- 1. Waiver and Release.** I, the Volunteer, release and forever discharge and hold harmless The Salvation Army from any claim or liability that I, the Volunteer, may have against The Salvation Army with respect to any bodily injury, personal injury, illness, death or property damage that may result from my participation in a disaster relief operation. I also understand that The Salvation Army does not assume any responsibility or obligation to provide financial or other assistance, including, but not limited to medical, health, or disability insurance, in the event of injury, illness, death or property damage (see insurance requirements below). I acknowledge there are known, and unknown dangers associated with disasters natural or human, and there is therefore risk associated with volunteering for disaster or social services.
- 2. Insurance.** The Salvation Army does not carry or maintain, and expressly disclaims responsibility for providing any health, medical, disability, workers' compensation or unemployment insurance coverage for the Volunteer. EACH VOLUNTEER IS EXPECTED AND ENCOURAGED TO CARRY PERSONAL HEALTH INSURANCE AND OTHER PERSONAL INSURANCE COVERAGE PRIOR TO REGISTERING AS A SALVATION ARMY VOLUNTEER.
- 3. Medical Treatment.** Except as otherwise agreed to by The Salvation Army in writing, I hereby release and forever discharge The Salvation Army from any claim whatsoever which arises or may hereafter arise on account of any first-aid treatment or other medical services rendered to me by Salvation Army personnel in connection with an emergency that occurs in performing volunteer services with The Salvation Army.
- 4. Assumption of Risk.** I understand that my time with The Salvation Army may include activities that may be hazardous to me, including, but not limited to, cooking and food preparation activities, loading and unloading of heavy equipment and materials, transportation to and from a disaster site, working in situations where I might be exposed to infectious diseases, including, but not limited to COVID-19 or SARS-CoV-2, and working in locations damaged by the effects of a disaster. I recognize and understand that my time with The Salvation Army may, in some situations, involve inherently dangerous activities. I hereby expressly and specifically assume the risk of injury or harm in these activities and release The Salvation Army from all liability for injury, illness, death or property damage resulting from the activities of my volunteer service with The Salvation Army.
- 5. Photographic Release.** I grant and convey unto The Salvation Army all right, title and interest in any and all photographic images and video or audio recordings made by The Salvation Army during my volunteer service for The Salvation Army, including, but not limited to, any royalties, proceeds or other benefits derived from such photographs or recordings.
- 6. Other.** I understand that it is my desire to further the work of The Salvation Army by performing services as a volunteer, specifically as a volunteer in emergency disaster or related services. I undertake to perform said services as a volunteer without compensation and that, in performing said services, I acknowledge that I am not acting as an employee or independent contractor of The Salvation Army.
- 7. Severability.** Volunteer understands the purpose of this release and waiver of liability with respect to the Charitable efforts of The Salvation Army and desires to be a part of its volunteer disaster services. As a result, if any of Sections 1 through 7 of this Volunteer Release and Waiver of Liability agreement are held to be invalid and unenforceable, then the Parties agree to modify the unenforceable provision with an enforceable provision that best represents the intention of the Parties to this Volunteer Release and Waiver of Liability.

To express my understanding of this document and attest that all information is true, I sign here with a witness.

Volunteer Name (please print)

Witness Name (please print)

Volunteer Signature

Witness Signature

Date

Date