INDIVIDUAL VOLUNTEER FORM



Second Harvest Food Bank of North Central Ohio appreciates your services and will do our utmost to ensure that your volunteer experience is rewarding, productive, and safe. We ask for your cooperation in following these guidelines:

GENERAL GUIDELINES

- Willingness to listen to a 5-10 minute training from our staff to explain the assigned volunteer project.
- Volunteers should display appropriate behavior at all times.
- Volunteers should be respectful of other staff and volunteers as well as respectful of the facility, property and equipment of Second Harvest.
- Youth volunteers (ages 12-17) who are not part of a group must have a parent/guardian's signature to be able to volunteer with us and be accompanied by an adult over 21 years old.

SAFETY GUIDELINES

Second Harvest Food Bank of North Central Ohio has Good Management Practices to promote food and personnel safety. The following guidelines protect your safety and ensure a safe food supply chain at Second Harvest.

Food Safety

- In order to prevent contamination of food products, no persons with cold symptoms, flu, boils, sores, infected wounds or any other infections or communicable diseases are permitted to contact food.
- Volunteers must wash hands before beginning shift, and after eating, drinking, using the restroom, and otherwise soiling hands.
- Volunteers participating in bulk food repack projects (repacking cereal, pasta, rice, etc.) must wear a hairnet and beard net (if needed), gloves, and an apron, and remove all dangling earrings, bracelets, watches and necklaces and cover any stud earrings with a hairnet. Any rings other than plain bands must be removed and plain band rings must be covered by gloves. Lockers are available to store personal items.
- No food or drink of any kind is permitted in the Warehouse, Volunteer Repack Room or Clean Room of the facility, including gum and candy. Any spill or improperly disposed of food or drink product can contaminate inventory food products and be attractants for insect pests and rodents.
- No one is allowed to consume or remove from the premises any donated or purchased food or other non-food products.
- Report any glass breakage to a staff member immediately. Staff members are trained in the proper procedure to clean up glass breakage in order to prevent contamination of inventory food products.
- The FDA has identified the top eight allergens as wheat, milk, eggs, fish, seafood, peanuts, tree nuts and soy.
 Spills of any products containing these allergens need to be reported immediately to a staff member. Staff members are trained in the proper procedure to clean up food allergens to prevent contamination of inventory food products.
- Second Harvest is a tobacco-free campus. Tobacco use of any kind is prohibited.

Personal Safety

- Volunteers must check-in at the front desk on arrival and check-out at departure.
- Volunteers are assigned to specific work areas in the warehouse. For personnel safety and accountability, volunteers must remain in their assigned work area until their shift ends or they are reassigned to another project.
- Volunteers may walk through the warehouse if they are accompanied by Second Harvest staff.
- Only Second Harvest staff are permitted to operate forklifts, stand-up lifts and pallet jacks.
- Open-toed and open-heeled shoes are not permitted in the Volunteer Work Center or Warehouse in order to protect your safety from powered equipment and the movement of products on pallets.
- Be aware of forklifts and pallet jacks. Pay attention when pallets are being moved. Stay safe!
- Volunteers may only use sanitizer and other cleaning products if instructed in proper use by a Second Harvest staff member.

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WAIVER & AGREEMENT

I do hereby, for myself, my heirs, executors, and administrators waive and discharge the Second Harvest Food Bank of North Central Ohio and all its officers, agents, and employees from and against any and all claims, demands, actions or cause of action arising from any injuries or damages I may suffer or sustain by my participation in any activity for which I participate in for Second Harvest. Furthermore, in full recognition and appreciation of the potential dangers and hazards inherent in such an activity, I do hereby agree to assume all the risks and responsibilities surrounding my participation in this activity or any activities undertaken in addition thereto.

By signing below I agree that I have read and understood the volunteer policies of Second Harvest. Address: ____ City State Zip Phone E-Mail Volunteer (signature)______ Date _____ Parent/Guardian (signature)______ Date _____ OPTIONAL INFORMATION Are you volunteering with a group? □No □Yes - Group Name_____ Volunteer Interests (check all that apply): □Office □ Repack □Special Events □Farmer's Markets □ Weekends Would you like to be contacted if we have any special projects? \Box Yes \Box No Are you available to volunteer on a regular basis? □Yes □No Would you like to be included on our mailing list? □Yes □No Do you have any health or physical conditions for which you receive or need special medical attention? \square Yes \square No If yes, please explain: **EMERGENCY CONTACT** Name______Phone:_____

Relationship to Volunteer