

Operation Food Secure - Site Volunteer Registration

Preferred Name: _____ Phone Number: _____

Email (If Available): _____

T-Shirt Size (Only available while supplies last)

S M L XL XXL XXXL XXXXL

Volunteer date(s) and location(s) (see flyer):

Operation Food Secure volunteer opportunities include moving food boxes that weigh between twenty to forty pounds. Do you have any physical limitations that would prevent you from participating in the program?

Yes No No answer

VOLUNTEER AGREEMENTS

While a background check is not a requirement for participating in this volunteer role, I understand that the United Way of Greater Topeka, Topeka Rescue Mission, and/or the City of Topeka could request an approved, complete background check at any point.

I agree to carry out all the responsibilities as described in the opportunity description with caring and compassion. I will distribute the food to anyone in need in my assigned area and will not discriminate. I agree not to sell, barter or use the food.

I, THEREFORE under the terms of this Agreement and sufficiency of which is hereby acknowledged, do hereby release and forever discharge United Way of Greater Topeka, Topeka Rescue Mission, City of Topeka, and State of Kansas; including their agents, employees, successors and assigns, and any and all persons, firms or corporations liable or who might be claimed to be liable, whether or not herein named, none of whom admit any liability to the undersigned, but all expressly denying liability, from any and all claims, demands, damages, actions, causes of action or suits of any kind or nature whatsoever, which I now have or may hereafter have, arising out of or in any way relating to any and all injuries and damages of any and every kind, to both person and property, and also any and all injuries and damages that may develop in the future, as a result of or which are caused or arise from my participating in the Operation Food Secure program at any point of my participation.

I, understand that participation in this volunteer role as a part of the Operation Food Secure, may expose me to COVID 19. While United Way of Greater Topeka, Topeka Rescue Mission, and the City of Topeka, will do all to make sure that every volunteer is trained and informed, this signature is an affirmation that I will not hold any of the following entities, agents, employees, successors and assigns, and any and all persons, firms or corporations liable for any illness that may be contracted as a result of your participation as a volunteer in the Operation Food Secure program.

BY SIGNING BELOW, I AM STATING THAT I UNDERSTAND AND AGREE TO ALL OF THE ABOVE.

Legal Signature: _____ Today's Date: _____

Printed Legal Name: _____