

## **Volunteer Agreements**

*please read the following information carefully before signing*

### **Confidentiality Agreement:**

I understand that Good Neighbors of Fort Greene and Clinton Hill (a project of the Fort Greene Association) volunteers are responsible for maintaining the confidentiality of all private and personal information to which they are exposed while serving as a volunteer. Such information should never be shared except when it is reasonable and necessary to provide services to GN members and should *never* be shared outside the organization. It is appropriate to discuss a volunteer experience with the Volunteer Coordinator or Executive Director, but not with others. Volunteers are required to comply with the Privacy Policy for Good Neighbors.

### **Conflict of Interest Policy:**

I shall not use any information acquired by virtue of my participation in the program for financial, material, or professional gain or advantage. I understand that if it is discovered that I have done so, or it appears evident that I have done so or have attempted to do so, this will disqualify me from further consideration for volunteer service or result in my dismissal as a volunteer.

### **Representation of the Organization:**

Volunteers are important ambassadors for Good Neighbors within the community. I understand that as a volunteer I must not act on behalf of or make statements representing the organization unless I have been authorized to do so by the Executive Director or an officer of the Governing Body or Board of Directors; I must not make statements to the press or media without prior authorization; and I am not authorized to sign any agreement involving contractual or

financial obligations of Good Neighbors of Fort Greene and Clinton Hill (FGA).

**Liability Waiver:**

I acknowledge that as a volunteer, I am not an employee of Good Neighbors and understand that I will not be paid for any work I perform. I consent and agree to assume all responsibility for any and all risks or events of damage or injury that may occur in the course of my volunteer work and that I am volunteering at my own risk. I fully and forever release and discharge Good Neighbors and its fiscal sponsor, The Fort Greene Association, their officers, employees, agents, and successors from any loss, cost, injury, damages or other liability which I may incur in the course of my volunteer work.

**Verity of Application Information:**

I certify that all information I have provided about myself is true and complete. I understand that any false information or omission may disqualify me from further consideration for volunteer service and may result in my dismissal, if discovered, at a later date.

**Confirmation of Understanding & Receipt of Volunteer Handbook(s):**

I understand that volunteering with Good Neighbors should be a joyful and positive experience. I acknowledge receipt of the Good Neighbors Volunteer Handbook. I have read and I understand the contents of the Handbook and agree to abide by the expectations the Village has of its volunteers.

I HAVE READ AND UNDERSTAND ALL OF THE ABOVE, HAVE HAD MY QUESTIONS FULLY ADDRESSED, AND HAVE RECEIVED A COPY OF THIS FORM FOR MY PERSONAL RECORDS.

Printed Name:

Date:

Signature: