



Dear Friend of Foster City Village,

Thank you for your interest in becoming a Foster Village volunteer. We recognize the value of your time and we will do everything we can to make your volunteer experiences gratifying and fulfilling. Our volunteers play a vital role in carrying out the mission of Foster City Village.

The members that you will be serving may include those who are frail and/or otherwise, dependent upon others. Please note that all volunteers will have a background check, references verified, and DMV driving record validated. This is to protect both the member, and you, the volunteer. In addition, our volunteer drivers must provide proof of auto liability insurance. All Foster City Village volunteers will be covered by our general liability policy.

Please start the Volunteer Application process by completing the Profile and Volunteer Opportunities forms. Once we receive the completed and signed forms, we will contact you for a brief volunteer interview, answer any questions you might have and explain next steps.

Return these documents to: Foster City Village

Office Address: 1000 E. Hillsdale Blvd. (Community Center, 2nd flr)
Foster City, CA. 94404
Office Phone: 650-378-8541
Email: fcvillage94404@gmail.com

Thanking you in advance. We look forward to welcoming you to the Foster City Village Volunteer family.

A Community Non-Profit that Provides Services in Support of Successful Aging



VOLUNTEER PROFILE

Name _____ Date _____

Address _____

Phone (H) _____ (Cell) _____ Email _____

In case of emergency, please notify:

Name _____ Relationship _____

Phone# _____ Email _____

Personal References:

1. Name _____ Telephone _____

2. Name _____ Telephone _____

Driver information (if Volunteering for Transportation Services):

Driver License# _____ Expiration Date _____

Driver License State _____ Date of Birth _____

Insurance Company _____

Policy Number _____ Effective Date _____

Automobile Year (1) _____ (2) _____

Auto Make/Model (1) _____ (2) _____

License Plate Number (1) _____ (2) _____

Program Commitment - I understand I am responsible for carrying my own auto liability and physical damage insurance, in order to maintain my active volunteer driver status with Foster City Village. Any damages to my vehicle are to be covered by my own insurance.

Volunteer Signature _____ Date _____

Social Security# _____

(will be destroyed once background check is completed)

VOLUNTEER OPPORTUNITIES

Volunteer Name: _____ **Date** _____

Please Check Your Area(s) of Volunteer Interest...



Transportation Services

- Grocery shopping
- Personal care appointments
- Medical appointments
- Salon appointments
- Village social and cultural events
- Errands (bank, pharmacy, stores)



Minor Handyman Services

- Carpentry–Door adjustments, light repairs
- Electrical –Replace light bulbs, change batteries in smoke alarms
- Plumbing–Unclog toilet or sink drain
- Miscellaneous–Replace furnace filters, hang pictures, assemble furniture, etc.



Health & Wellness Support

- Phone “Check-ins”
- In-Person Visit “Check-ins”
- Doctor visit assistance
- Home safety & fall prevention education
- Partner health program(s) support
- Walking & companionship
- Meal sharing



Social Programs Assistance

- Monthly coffees, luncheons and potlucks
- Book clubs
- Game days
- Interest groups, such as theater groups
- Field trips to shows, movies, museums
- Holiday parties
- Presentations & events coordination



Membership Nurturing Assistance

- New member welcome & orientation
- New member 90 day “buddy” support
- Membership satisfaction surveys
- Member “testimonial” statements
- Member health & wellness concerns
- Village “scrapbook” maintenance



In-Home Assistance

- Home organization & clutter clean-up
- Hazardous waste disposal
- Medications disposal
- Trash & recycling to the curb assistance
- Pet care assistance
- Property check-ins when away on vacation



In-Home Technology Assistance

- Computers & peripherals
- Facebook, Skype, Face Time
- Telephones & Mobile devices
- Televisions
- Stereos



Village Operations

- Special projects
- Publicity, social media
- Website design and maintenance
- Fundraising



Meals on Wheels



Second Harvest Food Bank

I will donate the \$28 electronic background verification processing fee (Optional)

(Volunteer application processing requires a personal background check)

For more information contact:

Foster City Village

Phone: (650) 378-8541

Email: fcvillage94404@gmail.com



VOLUNTEER CONFIDENTIALITY AGREEMENT

-VOLUNTEER APPLICATION-

By my signature below, I affirm that the facts set forth in it are true and complete. As a Foster City Village volunteer. I agree to the following:

- 1 I agree to conform to all Foster City Village policies, rules and procedures.
- 2 I will offer my time without monetary compensation.
- 3 I authorize Foster City Village to contact my references and perform a background check, including my driving record and any criminal records. I understand that all information collected in my background check will be kept confidential. Any references contacted have my permission to provide their candid evaluation of my suitability for the described volunteer work.
- 4 I agree that, I, my assignees, heirs and legal representatives will not make any claim against or sue Foster City Village, its officers, directors, employees, agents or contractors for injury of damage resulting from my act, neglect or fault as a volunteer.

I HEREBY RELEASE AND DISCHARGE FOSTER CITY VILLAGE AND ITS OFFICERS, DIRECTORS, EMPLOYEES, AGENTS AND CONTRACTORS FROM ALL ACTIONS, CLAIMS OR DEMANDS THAT I, MY HEIRS AND LEGAL REPRESENTATIVES NOW HAVE, OR MAY HAVE IN THE FUTURE, FOR INJURY OR DAMAGE RESULTING FROM MY VOLUNTEERING. I FURTHER UNDERSTAND THAT, IF I AM INJURED IN THE COURSE OF MY VOLUNTEER WORK FOR FOSTER CITY VILLAGE, I AM NOT COVERED BY ANY WORKERS' COMPENSATION PROGRAM AVAILABLE TO FOSTER CITY VILLAGE EMPLOYEES.

- 5 As a Foster City Village volunteer, I understand that it is imperative to protect the confidentiality of all information pertaining to any Village member, and that any unauthorized possession, use, copying, reading or disclosure of applicable records, ledgers or files is prohibited.
- 6 I hereby authorize Foster City Village to use any photographs taken of me while I am engaged in Foster City Village activities on its website and in publications and to release such photographs for publication in newspapers, magazines, and other printed material without notice or compensation to me, my heirs or assigns. I further understand that my consent to such release extends to the use of such photographs by any Community Village Organization (CVO) affiliated with Foster City Village.

Name _____

Signature _____ Date _____

Your signature confirms that you understand and accept the terms of the Volunteer and Confidentiality Agreement set forth above.