



GROUP VOLUNTEER APPLICATION

Group Affiliation:

Group Leader Contact Information Date

Name	Phone (s)
Address	E-Mail Address
City, State, Zip Code	

Group Volunteer Opportunities (Circle those that apply)

<u>ON-SITE:</u>	<u>OFF-SITE:</u>
Repackaging and Sorting Food	Grocery Store Food Drives *Kid Friendly
General Maintenance and Cleaning	Major Food Drives: <i>Stamp Out Hunger, Symphony Under the Stars</i>
Garden, Farm Stand, and Outdoor Projects *Kid Friendly	Recycling, Sorting, and Crating Bags * Kid Friendly
Seasonal: Holiday Distributions, Summer Lot Party	Fundraising, Advocacy, and Outreach Events
Kid Packs Builds	

Number of Volunteers

# of adults	# of children (12-16)

Availability: Preferred Date/Time

What does your group hope to gain from this experience?

Person to Notify in Case of Emergency (Group Leader)

Name	
Address	
City, State, ZIP Code	
Phone (s)	
Relationship	

Confidentiality Policy

Information learned about individual clients while working as a volunteer at Helena Food Share is confidential. All records dealing with specific individuals or families must be treated as such. General information or statistical material which is not specifically identified with any individual or family is not classified as confidential information and may be used with staff discretion. Our confidentiality policy is an extension of our mission to treat all with dignity and respect. It is of utmost priority that you respect our customers privacy.

Policy Checklist (Please initial each item)

- I understand that my safety and the safety of others are of utmost importance and that I must immediately report to Helena Food Share Staff any injuries and that volunteers are not covered under a workman's compensation policy.
- I agree to the Helena Food Share *Customer Confidentiality Policy* above and will stress it's importance to all members of the group.
- I agree to supply HFS with a *Prospective Volunteer Parental Consent Form* for all minors between 12-16.
- I understand that I am responsible for all minor volunteers, including their safety, while volunteering at HFS.
- I have read and agree to the attached Group Volunteer Guidelines.

Signature

Date

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1616 Lewis Street • PO Box 943 • Helena, Montana 59624 • www.helenafoodshare.org • 406.443.3663

Prospective Volunteer Parental Consent Form

I give consent for my child _____ to provide volunteer services to Helena Food Share. In signing this, I agree that my child adheres to the volunteer code of conduct, respects the privacy of our customers, and observes safety guidelines.

Signature of Parent/Guardian _____ Date _____

Printed name of Parent/Guardian _____

Group Affiliation/Group Leader _____

Emergency Contact Phone _____

**Children under the age of 16 are not allowed to volunteer without parental consent and must be accompanied by a parent/guardian or group leader. If volunteering with a group, we ask that there be 1 adult for every 5 minors. All minors under 16, and groups with minor members, will be assigned projects outside of the pantry shopping hours. Children under the age of 12 cannot volunteer at Helena Food Share for risk of injury.*