VOLUNTEER WAIVER



Release Agreement

I understand that I am volunteering my services to the St. Louis Area Foodbank, Inc. I hereby release, indemnify and hold harmless the St. Louis Area Foodbank, Inc., its officers, directors, employees, successors, assigns, legal representatives, organizers, sponsors and supervisors of its activities, from any and all claims, causes of action and liability arising from or in any way connect ed with my volunteer participation with the St. Louis Area Foodbank, Inc.

I understand I am expressly assuming all risk, including but not limited to all risk of injury, associated with my volunteer participation at the St. Louis Area Foodbank, Inc. and/or any activity conducted offsite on behalf of the St. Louis Area Foodbank, Inc.

I understand that while volunteering at the St. Louis Area Foodbank, Inc., photographs may be taken of the volunteers while on the premises. I hereby grant permission and consent for the St. Louis Area Foodbank, Inc. and its authorized representatives to record, via photography or video, pictures of my participation. I further agree that any or all of the material photographed may be u sed, in any form, as part of any future publications, brochures, other printed material, or social media postings used by the St. Louis Area Foodbank, Inc., and that such use shall be without payment of fees, royalties, or any other compensation.

COVID-19 ACKNOWLEDGEMENT:

Effective Monday, February 28, 2022 in accordance with guidelines from the St. Louis County Department of Public Health, St. Louis Area Foodbank is a MASK OPTIONAL environment. We fully support any individual that chooses to continue to mask.

We respectfully ask that anyone experiencing a fever, cough, shortness of breath, or that has been exposed to someone who recently tested positive for COVID-19 to refrain from entering our facility.

FOR THOSE WITH MINORS: If only one chaperone, parent or guardian signs these forms on behalf of a minor volunteer, then the undersigned chaperone, parent or guardian of the minor Volunteer hereby covenants, warrants, represents and agrees that he or she is executing these forms on behalf of, and as an agent for, any other individual who may be a parent or guardian of the minor volunteer, that he/she is fully authorized to do so, and that by executing such Volunteer Release form, the undersigned is binding himself/herself, the Volunteer and any other parent or guardian of the Volunteer, and all of their heirs, next of kin, assigns and legal representatives to such Release.

All information obtained, including name, address and telephone numbers, etc., shall be kept strictly confidential by the St. Louis Area Foodbank, Inc.

By signing, I express my understanding and intent to enter into this Release Agreement willingly and voluntarily.