

Langley Meals on Wheels

20414 Douglas Crescent Langley, BC V3A 4B4 604.533.1679

Authorization and Statement of Confidentiality

I, authorize Langley	Meals on Wheels to collect personal					
information appropriate to the position(s) applied for concerning my employment history as well as any colunteer experience, and to verify any character references I have supplied. I understand that the information obtained will be confidential but will be shared with the appropriate Police Department to obtain clearance on a Police Records Check. I understand that my personal information may be used to keep me informed and up to date on the activities of Langley Meals on Wheels, including services,						
unding needs and opportunities to volunteer or to give. I hereby certify that my driver's license and ehicle insurance are valid and that the above information is true to the best of my knowledge. I agree be keep Langley Meals on Wheels informed if any of the above information changes at any time. I inderstand that any willful falsification of information may result in termination of my volunteer assignment.						
I agree to hold as confidential and will not disclose or release to any person or agency at any time, except where required by law, any information or document that tends to identify anyone receiving Langley Meals on Wheels services without the written consent of the individual or their guardian prior to the release or disclosure of information or documents. I understand that a breach of client confidentiality may result in my being removed from my volunteer position; and that release of confidential information might be cause for legal action.						
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Signature	Date Signed					

Important Note

Witness Signature

All information Langley Meals on Wheels receives about clients is confidential – names, addresses health conditions, etc. It is NOT considered a violation of confidentiality for volunteers to inform Langley Meals on Wheels of concerns about clients. Often volunteers are the first persons to recognize that a client is in poor health or has a problem needing attention. Please do not identify clients by name or address to ANYONE other than Langley Meals on Wheels staff. Thank you for your cooperation.

Witnessed By

Conflict of interest arises when a person participates in a decision about a matter (including any contract or arrangement of employment, leasing, sale or provision of goods and services) which may benefit or *be seen to* benefit that person because of his/her direct or indirect monetary or financial interests affected by or involved in that matter.

It is the duty of any person taking part in the operations of the Langley Meals on Wheels Services Society to adhere to the Conflict of Interest Policy at all times. In the event that such a matter arises, the person shall formally disclose the interest, refrain from attempting to persuade or influence other persons participating in the decision and shall not cast any vote on the matter.

Volunteer Policies

Please read the following volunteer policies and terms and click each checkbox to indicate that you have read, understand, and agree to each statement.

•	Vehicle Usage: As a volunteer, I understand that Langley Meals on Wheels does not insure personal vehicles belonging to volunteers and the use of my vehicle is at my own risk. I agree that I am solely responsible for my own personal property and vehicle. I understand that any parking tickets or fines accrued while volunteering with Langley Meals on Wheels will not be the responsibility of Langley Meals on Wheels. □ I have read, understand, and agree.
•	Waiver : I waive and release any and all claims for myself, my heirs, executors, and administrators against Langley Meals on Wheels, its agents, employees and licensees in conjunction with any injury, illness or death which may directly or indirectly result from my participation in volunteering for Langley Meals on Wheels.
	□ I have read, understand, and agree.

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