



**Volunteer Waiver: Authorization and Statement of Confidentiality**

I, \_\_\_\_\_, authorize Langley Meals on Wheels to collect personal information relevant to the position(s) I have applied for, including my employment history and volunteer experience, and to verify the character references I have provided. I understand that the information gathered will remain confidential but may be shared with the appropriate police department for the purpose of obtaining clearance through a Police Background Check. I acknowledge that my personal information may also be used to keep me informed about Langley Meals on Wheels' activities, including services, programs, funding needs, special events, and opportunities to volunteer.

I, \_\_\_\_\_, hereby certify that my driver's license and vehicle insurance are valid, and that the information I have provided is true to the best of my knowledge. I agree to notify Langley Meals on Wheels of any changes to the above information. I understand that any willful falsification of information may result in the termination of my volunteer position.

I agree to maintain confidentiality and will not disclose or release any information or documents that could identify a recipient of Langley Meals on Wheels services to any person or agency, unless required by law or with the prior consent of the individual or their guardian. I understand that violating client confidentiality may result in the termination of my volunteer assignment and could lead to legal action if confidential information is improperly disclosed.

Signature

Date Signed

Witness Signature

Witnessed By

**Important Note:**

All information that Langley Meals on Wheels receives about clients is strictly confidential, including names, addresses, health conditions, and more. It is NOT a breach of confidentiality for volunteers to report concerns about clients to Langley Meals on Wheels staff. In fact, volunteers are often the first to notice if a client's health is declining or if they are facing other issues that need attention. However, please refrain from sharing any client's name or address with anyone outside of Langley Meals on Wheels staff.

**Conflict of Interest:** A conflict of interest arises when an individual is involved in a decision related to any matter—such as a contract, employment arrangement, lease, sale, or provision of goods and services—that could directly or indirectly benefit them financially. It is the responsibility of anyone involved with Langley Meals on Wheels to always adhere to the Conflict-of-Interest policy. If such a situation occurs, the individual must formally disclose their interest, refrain from influencing or persuading others involved in the decision and abstain from voting on the matter.

**Volunteer Policies:** Please read the following volunteer policies and terms. Indicate your understanding and agreement by selecting each checkbox.

**Vehicle Usage:** As a volunteer, I understand that Langley Meals on Wheels does not provide insurance for personal vehicles used by volunteers. I acknowledge that using my vehicle while volunteering is done at my own risk, and I am solely responsible for any personal property and vehicle damage. Additionally, I understand that any parking tickets or fines incurred during my volunteering are my responsibility and not that of Langley Meals on Wheels.

I have read, understand, and agree.

**Waiver:** I hereby waive and release all claims for myself, my heirs, executors, and administrators against Langley Meals on Wheels, its agents, employees, and representatives, in connection with any injury, illness, or death that may directly result from my participation as a volunteer.

I have read, understand, and agree.