



# VOLUNTEER APPLICATION FORM

(For First-Time Volunteers Only)

Please complete this form and bring it with you the first time you volunteer. **CHILDREN MUST BE AT LEAST 11 YEARS OLD TO VOLUNTEER** (except for special "Family Nights/Days" when we allow children as young as 8). Children under 16 years of age must be accompanied by an adult, and an adult should sign and date the form.

Community **FOOD BANK** of Eastern Oklahoma

Last Name	First Name	Middle Name
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Mr.  Ms.  Mrs.  Miss  Dr.  Preferred nickname: \_\_\_\_\_

**Home address:**

Street Address	Apartment Number
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City	State	Zip Code
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Home Phone: ( ) ( ) ( )	Business Phone: ( ) ( ) ( )	Cell Phone: ( ) ( ) ( )
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Fax Number: ( ) ( ) ( )	E-mail Address:
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Is anyone else at this address a volunteer here? \_\_\_ Yes \_\_\_ No If yes, Who? \_\_\_\_\_

Have you ever volunteered with us before? \_\_\_ Yes \_\_\_ No If yes, When? \_\_\_\_\_

**Date of Birth:**

Month:	Day:	Year:	Spouse's name:
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I am volunteering with (Group Name):	If a student, what school?
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Emergency Contact:	Emergency Phone Number:	Other Emergency Number:
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**Areas in which I am interested in volunteering:**

- Warehouse \*\*    Building Maintenance \*\*    Office/Clerical Work    Culinary Center \*\*    Pick Vegetables  
 Special Events    Sorting/Repacking Food\*\*    Bulk Mailings    Agency Monitoring    Data Entry

**\*\* These work areas require CLOSED-TOED shoes ONLY – NO flip-flops or sandals allowed.**

### RELEASE OF LIABILITY

The undersigned individual will be engaged in volunteer service in the form of special events, warehouse, office and related duties for Community Food Bank of Eastern Oklahoma ("CFBEO"). This participation is voluntary on the part of the individual, who hereby releases CFBEO, its director, employees, agents, Board of Directors, predecessors, successors, assigns, representatives, attorneys, subsidiaries, and affiliates; and all persons acting by, through or in connection with any of them from any and all claims, liabilities, damages, losses, demands, and actions of any nature whatsoever arising out of the individual's participation in such duties. Such release extends to any injury, damage, loss, or liability incurred by the individual while engaged in such duties, whether occurring on or off the premises owned or operated by CFBEO.

### PHOTO RELEASE

I hereby grant the Community Food Bank of Eastern Oklahoma (CFBEO) permission to use my photograph in any and all publications, including web site entries, without payment or any other consideration in perpetuity.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of parent or guardian if volunteer is under 16 years of age