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1. As a volunteer of the Fallbrook Food Pantry, I hereby agree to hold harmless and waive any and all claims or causes of action against the FFP arising out of any cause whatsoever, including but not limited to claims arising out of negligence or intentional conduct of its volunteers or agents. 2. I attest that I am physically fit and prepared to perform the tasks assigned to me as a FFP volunteer. (Let us know if you have a disability and we will try to find an appropriate task for you.) 3. I further agree to use my personal insurance as the primary provider in the event of injury due to my work as a volunteer for the FFP. 4. I shall not operate a personal vehicle for volunteer activities unless I have at least the minimum amount of liability insurance required by California law. 5. The Fallbrook Food Pantry is not responsible for loss or damage to volunteer's personal property. 6. I also grant the Fallbrook Food Pantry full permission to use photographs of me for publicity and promotional purposes. 7. As a volunteer I do not expect to be compensated. **I have read, understand and agree to the above Fallbrook Food Pantry policies, safety and emergency procedures, and waivers:**

\_\_\_\_\_  
Volunteer's Signature      Print Name      Date  
If under 18, signature of parent or \_\_\_\_\_  
legal guardian is required; Date \_\_\_\_\_  
Name      Relationship      \_\_\_\_\_  
Print

\_\_\_\_\_  
Minor's Name (printed)

\_\_\_\_\_  
Parent or Guardian's Name (printed)

\_\_\_\_\_  
Parent or Guardian's Signature

\_\_\_\_\_  
Witness's Name (printed)

\_\_\_\_\_  
Witness's Signature

\_\_\_\_\_  
Date of Signature

**Never**  
\_\_\_\_\_  
Date of Expiration