

Ruby A. Neeson Diabetes Awareness Foundation, Inc.

PO Box 2313, Duluth Georgia 30096 | 404-838-1620 | www.fightdiabetesnow.org | info@fightdiabetesnow.org



Court Ordered Community Service Volunteer Agreement

Name: _____ Birth Date: _____

Address: _____

City: _____ State: _____ County: _____

Phone: _____ e-mail: _____

The following rules apply each time you perform community service work for the Ruby A. Neeson Diabetes Awareness Foundation (RANDAF):

- Determination for community service will be decided by the volunteer coordinator.
- Volunteers must serve a four-hour minimum shift.
- RANDAF only accepts minor offenses such as: traffic violations, DUI, and alcohol. No theft, robbery, burglary, or violent crimes.
- Proof of the charge is required.
- Rendering clinical medical advice, and medication is not permitted during service hours.
- Volunteers are responsible for securing your own possessions (ie, cell phone, purses, laptop, etc.).
- Court ordered community service volunteers must 18 years of age or older.
- **Failure to sign the agreement and timesheet at the end of assignment will result in a rejection of community service hours.**

** Please be advised that defendants/offenders who fail to perform service as agreed will be reported to the courts.*

** Falsifying community service hours may result in criminal charges, which are often considered a felony charge and a revocation of probation.*

WAIVER, RELEASE, HOLD HARMLESS AND CONFIDENTIALITY AGREEMENT

The following I, _____, understand and agree that, while providing services as a volunteer ("Services") to Ruby A. Neeson Diabetes Awareness Foundation, Inc. ("RANDAF"), there are certain risks (some of which I may not fully recognize) and that injuries, death, property damage or other harm could occur to me during or resulting from the provision of the Services, including injuries incurred as a result of lifting heavy objects. I, therefore, covenant and agree, on behalf of myself and my heirs, assigns, and any other person claiming by, under or through me, as follows:

1. I accept and voluntarily incur all risks of any injuries, damages or harm which arise during or result from my provision of the Services, whether or not caused in whole or in part by the negligence or other fault of RANDAF or its directors, officers, employees, agents or insurers (the "Released Parties").
2. I waive all claims against and hold harmless any and all of the Released Parties for any injuries, damages, expenses, liabilities, losses or claims, whether known or unknown, which arising during or result from my provision of the Services, whether or not caused in whole or in part by the negligence or other fault of any of the Released Parties, and forever release and discharge the Released Parties from all such claims.
3. I understand that confidentiality concerning information pertaining to RANDAF and its partners, program participants is important and agree to maintain as confidential information or knowledge gained through my volunteer Services. Generally speaking, all information that is not publicly available or in the public domain is considered "confidential." I agree to maintain such confidentiality while working as a volunteer at RANDAF and thereafter. I further understand that my violation of this confidentiality provision could result in immediate release from RANDAF.
4. It is my express intent that this Waiver, Release, Hold Harmless and Confidentiality Agreement ("Agreement") shall bind my successors, assigns, heirs, and personal representative.
5. I acknowledge and agree that this Agreement will be construed in accordance with the laws of the State of Georgia. 6. By signing below, I acknowledge and represent that I have read and understand all of the foregoing, have been advised that I should consult with my own legal counsel prior to signing this Agreement, hereby execute this Agreement voluntarily, as my own free act and deed and that no oral representations, statements or inducements have been made by any of the Released Parties in connection with this Agreement. I further acknowledge that the RANDAF Volunteer Handbook has been made available to me.

In case of emergency, call: Name: _____ Telephone: _____

Signature of Volunteer: _____

Date: _____

Signature of Volunteer Coordinator: _____

Date: _____