



Our Daily Bread Food Pantry

Volunteer Application (Please print)

CRN# _____

Date: _____

Name: _____

Local Address: _____
Street City Zip Code

Alternate Address: _____
Street City Zip Code

Phone Number: ____/____/____ Date of Birth: ____/____/____

Email Address: _____

Emergency Contact Name: _____ Relationship: _____

Emergency Contact Phone Number: ____/____/____

Pantry tasks/skills you are interested in? (Circle all that apply)

Admin Assistance, Computer Work, Food Procurement, Food Transportation (if yes, do you have an auto insurance policy? ___Yes ___No) Fundraising, Grant Writing, Greeter, I/T, Lunch with Friends, Manual Labor, Mobile/Outreach Pantries (Friday afternoon/evening) Prayer, Register Guests, Shelving, Shopper Assistant, Translate for Guests

Months in the area: (Pls circle) Jan Feb Mar Apr May June July Aug Sept Oct Nov Dec

How did you hear about the Food Pantry? _____

Do you have any prior Food Pantry related experience? When and where? _____

Primary language? _____ Do you speak any other languages? Is yes, what are they?
(Pls circle) English Spanish Creole Other: _____

What is your church or organization affiliation? _____

Are you here for Community Service hours, what organization? _____

Any pattern/circumstance that will make it inappropriate to serve with minors or that will compromise the integrity of Our Daily Bread Food Pantry? No ___ Yes ___

Over

I agree to the following conditions:

- All information on this application is open for discussion with Our Daily Bread Food Pantry Leadership Team
- I agree not to sue or engage in any type of legal action affecting Our Daily Bread Food Pantry, not subpoena anyone regarding this information, meetings, notes or records.
- Any and all information will be kept confidential and only be used with Our Daily Bread Food Pantry Leadership Team

Volunteer gives permission to Our Daily Bread Food Pantry to use their personal information in the HMIS data base. Volunteer further testifies that all information given on this Volunteer Form is true and complete to the best of their knowledge.

Photo Consent

I agree to allow Our Daily Bread Food Pantry unrestricted use of photographs taken of me and/or my family in the course of participation in activities sponsored by Our Daily Bread Food Pantry. I understand that Our Daily Bread Food Pantry intends to use such photographs only in connection with official Our Daily Bread Food Pantry publications and documents.

Volunteer Signature: _____ Date: _____