

**Appendix D**  
**St. Mark's United Methodist Church**  
**Safe Sanctuary Policy Volunteer Agreement**

Volunteer Name (printed): \_\_\_\_\_

In signing this form, I understand and agree to the following terms and conditions related to my volunteer service with the St. Mark's United Methodist Church:

- I recognize that, as a volunteer, I represent the above organization to the public. I accept responsibility for this status and will conduct myself accordingly.
- I understand that in the course of my service, I may learn certain facts about volunteers, participants, and donors, which are of a highly personal and confidential nature. Examples of such information are medical diagnoses and treatment, phone numbers and addresses, finances, personal relationships, etc. I understand that all such information, including the identity of the individual, must be treated with total confidentiality (including on social media postings) and must remain confidential even after my service ends. Please initial here: \_\_\_\_\_
- I agree to abide by the Safe Sanctuary Policy of St. Mark's United Methodist Church. I understand that the limits of confidentiality, however, include that I must immediately report to the appropriate leadership any knowledge or involvement in regard to child/youth/vulnerable adult abuse and the intentions to do harm to another person or to one's self. Please initial here: \_\_\_\_\_
- I am aware that as a volunteer, I expose myself to potential hazards which include but are not limited to: kitchen accidents, cuts, burns, back injury from lifting, car accidents, property damage or injury to others in car accidents, falls, etc. I am voluntarily participating in this service with the knowledge of the potential hazards involved and hereby agree to accept any and all risks of injury. Please initial here: \_\_\_\_\_
- I agree that my assignees, heirs, distributees, guardians, and other legal representatives will not make a claim against, or sue for injury or damage resulting from the negligence or other acts, howsoever caused, by any employee, agent, or volunteer contractor of the organization as a result of my participation as a volunteer. I hereby release the St. Mark's UMC from all actions, claims, or demands that I, my assignees, heirs, guardians and legal representatives now have or may hereafter have for injury resulting from my participation as a volunteer. Please initial here: \_\_\_\_\_
- If my volunteer service includes driving an automobile, I acknowledge that I have both a valid driver's license and automobile liability insurance policy as required by state law. I agree to maintain my license and insurance in good standing for my tenure as a volunteer for the organization. I am knowledgeable of and agree to abide by local and state traffic laws. I agree not to drive while under the influence of alcohol and/or other intoxicating substances. Please initial here: \_\_\_\_\_
- I agree to bring any problems or conflicts that are beyond the scope of my volunteer service or ability, to the immediate attention of the appropriate leadership.
- As a volunteer, I understand that my services can be discontinued at any time for any reason.

This understanding will remain in effect throughout my continuous service as a volunteer.

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Should I not serve as a volunteer for more than one year, a new agreement will need to be completed.

\_\_\_\_\_

Signature

\_\_\_\_\_

Date

Signature of Parent (if volunteer is under 18 years of age)