Responsibilities, Waivers, and Indemnity Agreements

I understand my responsibility as a volunteer with NHA includes abiding by laws and policies regarding NHA’s core values, the preservation of confidential information, indemnity, and other responsibilities listed below and in the volunteer handbook. My signature below certifies that I have read, understood, and consent to the information included in the related documents.

I also understand that I have authorized a background screening by signing this document, and I certify that all elements of the personal data I have provided are true, accurate, and complete. I understand and agree that any omission, false statement, or misleading statement is grounds for disapproval of my application.

__________________________________________________________  ____________________________
Applicant Signature                                      Date

If volunteer is under 18 years of age, a parent or other designated adult must read and sign the following:
This release, its significance, and assumption of risk have been explained to and are understood by the minor.

__________________________________________________________  ____________________________
Signature of Designated Adult                             Date

__________________________________________________________
Printed Name of Designated Adult
Northwest Housing Alternatives
Volunteer Responsibilities, Agreements, and Waivers

I agree to serve as a volunteer with Northwest Housing Alternatives (hereafter, “NHA”). This document sets forth the responsibilities and agreements of myself and of NHA regarding my participation in volunteer programs partially or wholly coordinated by the organization.

NHA Core Values
I agree to perform my assigned volunteer duties to the best of my ability and in a conscientious manner. I understand that I will serve as an ambassador of NHA, and my behavior and language reflect directly onto the organization, our staff, and our standing in the community.

I will act in accordance with NHA’s core values:
- **Respect for the dignity** of all individuals - residents, program participants, staff, board, neighbors and service providers
- **Unconditional acceptance** of people and their needs
- **Support** of diversity and multiculturalism
- **Responsibility** to our clients, community, and organization

Confidentiality
NHA requires that volunteers maintain strict confidentiality with respect to all information concerning the organization, as well as the clients and others we serve. We caution volunteers to demonstrate professionalism, good judgment, and care to avoid unauthorized or inadvertent disclosures of confidential information.

Therefore, as a volunteer, I agree not to disclose or discuss:
- Any information obtained in the course of my volunteer activities to any third parties without prior written consent from NHA. This includes but is not limited to the following: identifying and other information about current/former clients; confidential personal details of staff or volunteers; financial, vendor, or donor information; or details of pending projects and proposals, research and development.
- Any of the above-mentioned information or other organizational information directly or indirectly and agree not to violate the spirit or intent of this provision.
- These same matters after ending my service as a volunteer with the organization. I understand that this policy is not intended to prevent disclosure where required by law.

I understand, furthermore that:
- I may request to review my volunteer file at any time, including a bi-annual request for a copy of my background check results, if obtained during the course of my service.
- NHA will not divulge my personal information to third parties without my prior written consent.
- The materials and tools provided by NHA are and remain the property of NHA, and I agree to return these tools and any remaining materials to NHA at the end of my volunteer service.
- Any product I create on behalf of NHA is the property of the organization.
- NHA wholly determines my volunteer tenure, and I may be dismissed from my volunteer duties at any time, with or without cause.

Release from Liability and Waiver of Indemnity
As a volunteer, I understand and agree that:
- I control the dates and times when I am available for service. NHA is not responsible for scheduling my volunteer work.
I will not receive compensation for any time spent volunteering. I am not an employee or agent of NHA for any purpose, and NHA neither controls nor mandates my services.

I am not entitled to benefits, including worker’s compensation or employment insurance benefits, upon the termination of this agreement or because of this service.

NHA does not provide me with insurance coverage for any injuries, conditions, or losses arising out of volunteer activities. NHA does provide liability insurance coverage on all NHA vehicles used during service projects.

I must maintain and provide my own primary medical and automobile liability insurance when driving a non-NHA vehicle to cover potential medical and other costs related to my service. I am encouraged to maintain property and life insurance coverage while serving as a volunteer.

My participation as a volunteer may require of periods physical activity and will require the exercise of reasonable care to avoid injury.

Injuries or losses to others, such as co-workers or program participants, may occur because of my negligent or intentional acts during volunteer service. To avoid such harm, I must exercise care and act responsibly in serving others.

I voluntarily participate in this activity with knowledge of the hazards and potential dangers involved, and agree to accept all risks of personal injury and property damage.

I (and my assignees, heirs, guardians, and legal representatives) will not make a claim against or sue NHA or its employees, agents, or contractors for injury or damage resulting from the negligence, whether active or passive, or other acts, however caused, of any of its officers, employees, agents, or contractors as a result of my volunteering.

If injured in the course of volunteering, NHA’s workers’ compensation program does not cover me.

I authorize NHA to seek emergency medical treatment on my behalf in case of an injury, accident, or illness arising from my involvement as a volunteer.

I will be responsible for medical costs incurred by such accident, illness, or injury. All costs for injury or loss above the coverage provided by my insurance are my personal responsibility.

If any injury or loss to another does occur due to my intentional or negligent actions arising outside of the scope of my activities, I accept the liability, repair, or reparations for the harm done.

I waive and release NHA from all potential claims for injury, illness, damage, or death I may have against NHA that might arise out of my service, and I hold NHA harmless there from.

NHA will provide me with a legal defense, upon my request, in response to any claim or action brought against me arising from my volunteer service in a program NHA helps coordinate where I was acting in good faith and reasonably believed I was acting within the scope of my activity, and the act in question was not an intentional or knowing act constituting illegal, willful, or wanton misconduct. However, NHA will not defend me in any case where the injury resulted from my operations of a non-NHA motor vehicle, vessel, aircraft, or other vehicle for which a pilot or operator's license is required or where the suit is brought by an authorized governmental officer to enforce a federal, state, or local law.

In legal actions in which NHA provides my defense, NHA will pay for reasonable attorney fees, judgments, settlements, or other expenses directly related to my defense only up to the limits presently stated in the appropriate State statutes, one time only per volunteer. NHA will control the defense and I must reasonably cooperate and comply with NHA decisions and procedures.

If I am under the age of 18, I may only participate in volunteer service with the express written consent of my parent or a responsible adult designated by my guardian.
Northwest Housing Alternatives
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I hereby release and discharge NHA and its officers, employees, agents, and contractors from all actions, claims, or demands that I, my heirs, guardians, and legal representatives now have, or may have in the future, for injury or damage resulting from my participation in the project.