

By volunteering at Clinton Presidential Center in support of its community feeding efforts, I agree to the following:

1. I understand that I will receive no monetary benefits in return for my volunteer service, and that I will not be eligible to receive or participate in any employee benefits plans offered by the Clinton Foundation or World Central Kitchen.
2. I agree to follow all health and safety protocols outlined by project leaders including those relating to hand washing, not touching my face, and discontinuing use of cell phones or other personal electronic devices, during my volunteer shift.
3. I agree to fulfill my duties as a volunteer to the best of my ability and to treat all guests, staff, and other volunteers in a professional manner, and with courtesy and respect.
4. I agree to promptly report any potential violations by any individual of the health and safety protocols outlined by project leaders that I observe during my volunteer shift.
5. In consideration for my voluntary participation, I agree, for myself, my heirs, executors and administrators, not to sue and to release, indemnify, defend, and hold harmless the Clinton Foundation and its initiatives and related programs, World Central Kitchen, and both the Clinton Foundation's and World Central Kitchen's affiliates, directors, officers, representatives, employees, agents, and volunteers (collectively, the "Releasees"), from and against any and all liability, claims, demands, and causes of action whatsoever, damages, liabilities, costs and expenses (including attorneys' fees and costs), directly or indirectly arising out of or brought in connection with my volunteer service, regardless of whether resulting from such claims, damages, liabilities, costs and expenses are caused by the negligence of any of the Releasees or from any other cause.
6. I understand that in the event of an emergency, the Clinton Foundation will make every effort to contact my emergency contact listed above. In the event the Foundation is unable to reach my emergency contact, I (i) authorize the Clinton Foundation to act as my agent to consent to medical treatment on my behalf, seek medical care for on my behalf, and transport me to the nearest hospital as required, and (ii) authorize a qualified medical professional to administer all necessary medical treatment to me. I understand that I (or my parent/guardian, if I am a minor) will be responsible for the costs of any such medical care.
7. I grant the Clinton Foundation and World Central Kitchen permission to photograph, record and/or videotape me and to allow this material including, but not limited to my name, to be displayed or used for publicity or in promotional materials for the Foundation. I understand that I will not (a) receive any compensation for the use of my name, voice, image or likeness; (b) have the opportunity to inspect or approve any photograph or recording prior to its use or release; or (c) have any copyright interests in any photograph or recording. I understand the determination of what is considered promotional rests solely with the Foundation.
8. I understand that the Clinton Foundation may terminate this Volunteer Agreement, at any time, at its sole discretion, without prior notice.
9. If I have any questions about my duties or obligations under this Volunteer Agreement, or if I need to update my emergency or other contact information, I agree to contact Karen Sykes ksykes@littlerock.gov or Ben Thielemier bthielemier@clintonfoundation.org, either in-person, by phone, or by email.

I have carefully read this Volunteer Agreement and by signing below agree to all the terms contained herein.

Volunteer's Printed Name

Signature

Date