Meals for Students Volunteers working at the Clinton Presidential Center:

We care about your health and of your families and the greater Little Rock community. As such, if you would like to enter our facility, we ask that you agree to the following standards. If you do not wish to follow these standards, your entrance into our facility is prohibited at this time. Thank you for your cooperation as we work to create a safe work environment for our employees, volunteers, their families, and our greater community.

Please answer the following questions and sign below. You must complete this form before beginning volunteer shift or work for EACH DAY that you are volunteering/working:

Name:			
E-mail Address:			
Phone Number:			
If minor, name of Parent/Guardian:			
Phone Number of Parent/Guardian:			
Emergency Contact:			
	Name		Relationship Phone Number
	Yes	No	
1. Have you, or anyone in your household, been diagnosed with or suspected to have COVID-19?			If you answered <b>yes</b> to this question, you may not enter our facility for at least 21 days from the date of diagnosis.
2. Have you been in close contact with someone who has been diagnosed with or suspected to have COVID-19?			If you answered <b>yes</b> to this question, you may not enter our facility for at least 21 days from the date of diagnosis.
3. Do you currently have a heart condition, lung disease, diabetes, or any other serious health condition, <b>or</b> are over the age of 65?			If you answered <b>yes</b> to this question, you are not eligible to enter our facility.
4. Have you, or anyone in your household, traveled out of Arkansas in the last 14 days?			If you answered <b>yes</b> to this question you may not enter our facility until 14 days from the date of your return to Little Rock.
5. Do you, or anyone in your household, currently have a fever?			If you answered <b>yes</b> to this question, you may not enter our facility until your family member is fever free (without any medication) for 72 hours.
6. Have you, or anyone in your household, had a fever in the past 24 hours?			If you answered <b>yes</b> to this question, you may not enter our facility until you and your family member is fever free (without any medication) for 72 hours.
7. Do you, or anyone in your household, currently have a persistent cough and/or other respiratory symptoms?			If you answered <b>yes</b> to this question, you may not enter our facility until you and your family member are symptom free (without any medication) for 72 hours.
8. Have you, or anyone in your household, had a persistent cough and/or other respiratory symptoms in the past 24 hours?			If you answered <b>yes</b> to this question, you may not enter our facility until you and your family member are symptom free (without any medication) for 72 hours.

Please take your temperature before you arrive for work. You may not enter our facility unless your temperature is less than 99.6 and you are symptom free, without help of fever-reducers and other symptom altering medications.

I have taken m	y tempe	erature within t	he past 3	3 hours and	it was below	99.6.	Initial:
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If you experience a fever or symptoms or test positive for COVID-19 at any time following your shift for up to 14 days, please alert Karen Sykes <a href="mailto:ksykes@littlerock.gov">ksykes@littlerock.gov</a> or Ben Thielemier <a href="mailto:bthielemier@clintonfoundation.org">bthielemier@clintonfoundation.org</a>.

## **VOLUNTEER AGREEMENT**

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 <a href="mailto:ksykes@littlerock.gov">ksykes@littlerock.gov</a> or Ben Thielemier <a href="mailto:bthielemier@clintonfoundation.org">bthielemier@clintonfoundation.org</a>, either in-person, by phone, or by email.

herein.	Agreement and by sig	ining below agree to a	all the terms contail	ned
Volunteer's Printed Name				
Signature	<del></del>			
Date	·			