



VOLUNTEER SERVICE AGREEMENT

Volunteer Name: _____ Date: _____

Phone: _____ Email: _____

NKF Staff Partner Name: _____

Department Name/NKF Office: _____

- As a volunteer, I agree to donate my time to the service of the National Kidney Foundation (NKF), do so for the betterment of the organization and with the goal of furthering its important mission.
- I understand that NKF volunteers maintain accountability, are extended the right to meaningful duties and fair treatment. In exchange, NKF expects volunteers to perform assigned duties to the best of their ability and remain loyal to the enterprise goals and procedures. NKF reserves the right to sever ties with any volunteer who fails to adhere to these procedures, outlined in the Volunteer Code of Conduct.
- The volunteer services that I agree to perform for NKF are set forth in the applicable Volunteer Role Description, which I have reviewed and agreed to. By providing my support in this capacity I have agreed to abide by NKF's Volunteer Code of Conduct, Privacy Policy and will accept all HIPPA Compliance training deemed necessary for my specified role.
- I understand that I am not entitled to compensation except to cover reasonable travel expenses, reimbursable at the IRS Volunteer rate of \$0.14/mile for automobiles, updated periodically.
- I acknowledge that I am not under any contract (express or implied) to be hired by any person, organization or business relating to NKF. I understand that I am free to terminate my relationship with NKF at any time. NKF in turn, is free to dismiss my volunteer support at any time.
- I understand that I am expected to act with honesty, integrity and openness as a volunteer for the organization.
- I will hold NKF and its employees harmless for any injury that I might suffer during the time I am a volunteer. I will advise NKF of, and may decline to participate in, any task or undertaking that I am not qualified to perform or that I cannot perform without creating an unreasonable risk of injury to myself or others.
- I accept responsibility for my own acts and will hold NKF harmless if my conduct results in injury to others or damage to property.

Volunteer Signature: _____ Date: _____

Executive Director Signature: _____ Date: _____

Must be 18 years or older to serve as a Volunteer without consent from a parent or guardian.

As a parent or legal guardian of the above named Volunteer, I hereby give consent for him or her to become a volunteer for NKF as described in the above Volunteer Agreement and, by the signature below, join in and agree to be bound by the terms and conditions of the Agreement.

Signature of Parent/Guardian: _____ Date: _____

Volunteer Engagement Director Signature: _____ Date: _____