



**VOLUNTEERS**  
*the heartbeat of our mission*



## VOLUNTEER SERVICE AGREEMENT

Volunteer Name: \_\_\_\_\_ Date: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

NKF Staff Partner Name: \_\_\_\_\_

Department Name/NKF Office: \_\_\_\_\_

### NKF Volunteer Service Agreement and Liability Waiver

- 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. 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 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 rates.
- 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.

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

As a parent or legal guardian (under the age of 18) of the participating Volunteer, I hereby give consent for him or her to become a volunteer for NKF as described in the above Volunteer Agreement and agree to be

bound by the terms and conditions of the Agreement.

### **COVID-19 Policies for NKF Volunteers**

NKF is actively taking steps to mitigate the spread of COVID-19 to protect volunteers, patients, event participants and staff to maintain a healthy and safe environment.

We will continue to adhere to the recommendations of the following agencies and adjust policies as needed: Occupational Safety and Health Administration (OSHA), the Centers for Disease Control and Prevention (CDC), the World Health Organization (WHO), Federal, state and municipal governments.

Kidney disease patients and transplant recipients who are required to take immunosuppressive medication may not receive the same level of antibody protection from the COVID-19 vaccine as others.

We understand that the CDC, state and municipal governments have lifted restrictions and mask mandates; however, we remain committed to protecting our patients. We recommend that these individuals, and those around them, continue to be vigilant, mask-up, and social distance where possible.

We hope you'll consider joining us in taking extra precautions when indoors or when social distancing is not possible for the protection of patients, fellow volunteers, staff and the general public who still remain at an increased risk.

### **Expectations of Volunteers:**

While supporting an NKF-sanctioned off-site event or while on NKF premises, volunteers are required to abide by state and/or building/venue policies regarding mask usage and social distancing in order to protect themselves and those around them.

Where applicable:

- Practice Social Distancing, avoid shaking hands, high fives, hugs and fist bumps. Maintain at least six feet distance when interacting with another person, when possible.
- Volunteers are encouraged to wear a mask in settings where social distancing measures are difficult to maintain, including but not limited to, exits, entrance ways, elevators, restrooms, and common areas.

### **I expressly warrant that:**

- I will indemnify and hold the National Kidney Foundation (NKF) harmless from any and all claims of any kind or nature whatsoever arising out of, or in any way related to my participation as an NKF Volunteer.
- I acknowledge an inherent risk of exposure to COVID-19 exists in any public place where people are present. COVID-19 is an extremely contagious disease that can lead to severe illness and death. According to the Centers for Disease Control and Prevention, people with underlying medical conditions and older adults are especially vulnerable.

- I will indemnify and hold the NKF harmless from any and all claims of any kind or nature whatsoever arising out of, or in any way related to an alleged exposure to, or contracting of, COVID-19 by any event attendee, NKF staff person, patient or fellow Volunteer who alleges such exposure or illness during or after my participation.
- I voluntarily assume all risks related to exposure to COVID-19.
- If applicable, I also give permission for the free use of my name and picture in any media or other account of fundraising or other community events where I have volunteered my time.

I, the undersigned, waive and release NKF and its directors, officers, administrators, representatives and executors, employees, volunteers, agents, supervisors (collectively, the "Releasees"), from any and all claims, liabilities, or causes of action arising out of an injury to me, loss articles, loss of articles in car, car damage and car theft and from any and all claims, liabilities, or causes of action arising from my participation. I voluntarily agree for myself, my family, heirs, assignees the following:

1. **To assume full responsibility for any risks of loss, or personal injury, including death** that may be sustained by me, or any loss or damage to property owned by me, as a result of my volunteer service, including getting sick with COVID-19 or any other communicable diseases.
2. **To release, waive, hold harmless, discharge, and covenant not to sue** the Releasees from any and all liability, claims, actions, demands, expenses, attorney fees, breach of contract actions, breach of statutory duty or other duty of care, warranty, strict liability actions, and causes of action whatsoever, that I might have or may acquire in the future, arising out of or related to any loss, damage, or injury, including death, that may be sustained by me, or to any property belonging to me, while volunteering, including, but not limited to, any claim that the act or omission complained of was in whole or in part by the negligence or carelessness of the Releasees.

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: \_\_\_\_\_