

# Volunteer Agreement

Required for every volunteer entering a partner facility with Checkmate Community. By signing, you agree to the expectations below and commit to conducting yourself as a representative of our nonprofit.

## Volunteer Information

**Full Name:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Emergency Contact Name:** \_\_\_\_\_

**Emergency Contact Phone:** \_\_\_\_\_

**Emergency Contact Relationship:** \_\_\_\_\_

## Volunteer Commitments

I will arrive on time and stay for the full scheduled visit:

I will sign in at the facility front desk on arrival:

I will wear my Checkmate Community badge at all times:

I will never be alone with a resident; always with a team lead or staff:

I will follow all facility infection control and safety policies:

I will comply with staff redirection immediately and without argument:

I will not photograph residents without signed consent:

I will not share any resident's health, personal, or identifying info:

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Printed name:** \_\_\_\_\_ **Title:** \_\_\_\_\_

Return completed form to: [info@checkmatecommunitytx.org](mailto:info@checkmatecommunitytx.org) | or hand to our on-site lead at your next visit.