

Community Living, Inc.

Volunteer Confidentiality Affidavit

I hereby register as a volunteer for Community Living, Inc.

I agree to respect the rights of all clients with whom I have contact. Also, I will hold any client information obtained by me or to which I have access in the strictest confidence.

I release Community Living, Inc. from any and/or all liability related to or stemming from my visits or volunteer activities with this agency and/or any of its programs.

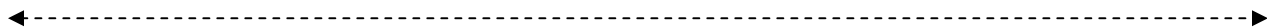
I agree to submit references and obtain approval from the appropriate supervisory staff member at Community Living before undertaking any one-on-one responsibility with an agency client.

Your signature

Date

Date of Birth:

Driver's License Number:



Minor's Parental Consent

I certify that I am the parent or legal guardian of _____
and hereby allow this individual to serve as a volunteer for Community Living, Inc.

I understand and agree with this individual's decision to volunteer for Community Living, Inc. I also agree with this individual's decision as to the capacity in which he or she will serve as a volunteer for this organization.

Signature of parent/guardian

Date