



## Confidentiality, Liability, and Photo Agreement

**Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Group/Company Name:** \_\_\_\_\_ **Phone Number:** \_\_\_\_\_

**Home Address:** \_\_\_\_\_ **E-mail:** \_\_\_\_\_

### Confidentiality

I understand that, in the performance of my volunteer duties for the National Center for Children and Families (NCCF), I may have access to confidential information about an NCCF client. I agree to keep the information confidential and understand that I am permitted to discuss such information only with my NCCF supervisor or the program coordinator. I understand that any violation of the confidentiality of this information may result in my dismissal as a volunteer and/or possible legal action taken against me.

- I will not disclose the identity of any NCCF client or confidential information about any NCCF client without the expressed consent of the person or a person legally authorized to consent on the person's behalf.
- I will protect the confidentiality of all information obtained in the course of any professional service except when disclosure is necessary. In instances when serious, foreseeable, and imminent harm to a client or other identifiable person(s) must be prevented, the least amount of confidential information directly relevant to achieve the desired purpose will be disclosed.
- I will protect the confidentiality of all NCCF clients when coordinating services via the use of computers, electronic mail, fax machines, other electronic or computer technology, and when responding to requests from other members of the media.
- I will not photograph clients or post to social media outlets about NCCF clients and will adhere to established NCCF communications protocol regarding any media involvement.

**Volunteer's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**If Minor, Parent/Guardian's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

### Liability

I acknowledge that as a volunteer for the National Center for Children and Families (NCCF), I am not an employee of NCCF and am not entitled to receive salary, benefits or other compensation. I further understand that I do not qualify for workers' compensation benefits and am expected to carry personal medical insurance to cover medical expenses for any injuries I incur while performing volunteer services. As consideration for participating in volunteer activities, I hereby agree that I, my assignees, heirs, guardians and legal representatives will not make a claim against, sue, or attach the property of NCCF, its Board of Trustees, its employees, agents, and any other persons, agencies, firms or corporations affiliated with NCCF from all actions, claims or demands that I, my assignees, heirs, spouses, guardians, and legal representatives now have or may hereafter have from any liability, whether currently known or unknown, resulting from my participation as a volunteer. This release of liability and assumption of risk, in addition to covering any past occurrences, is intended to discharge in advance their respective successors and assigns from and against any and all liability arising out of or connected in any way with my participation as a volunteer for NCCF even though that liability may arise out of negligence on the part of the persons or entities above mentioned or any other cause.

**Volunteer's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**If Minor, Parent/Guardian's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

### Photo Release

I agree to have photos of myself used for publicity by the National Center for Children and Families and those acting pursuant to their authority the absolute right and permission to: Record my participation and appearance on videotape, audiotape, film, photograph or any other medium. Use my name, likeness, voice and biographical material in connection with these recordings. I further grant NCCF the right to copyright such pictures and images in its own name or to publish, to market and to assign such pictures and images without further consideration, compensation or report to me. I hereby waive any rights or interests that I might have in the picture and images, including any rights to inspect and/or approve the finished photographs and images or the use of which the picture and images may be applied so long as such use is lawful.

**Volunteer's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**If Minor, Parent/Guardian's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_