



2019 Volunteer Application

Please check and list Location(s):

- Ruby's Pop-Up Pantry/Location _____
- NB Warehouse
- WP Warehouse
- Ruby's Second Hand Store
- Ruby's Food Shelf
- Ruby's Retreat Center
- Ruby's Well Care
- Ruby's Abroad

PLEASE PRINT CLEARLY (Required once per calendar year per Pop-Up Pantry)

APPLICANT INFORMATION

Name: _____ Female / Male
Last First Middle Date of Birth Circle

Former Name(s) / Maiden Name / Alias(s): _____

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Cell Phone: _____ Home Phone (landline/VOIP): _____

Email: _____ Receive Text Messages: Yes No
(Complete email addr: i.e., username@domain.com) (please check one)

Contact Preference: Cell Ph Home Ph Email Text

Emergency Contact: _____ / _____
Name Relationship

Emerg Cell Phone: _____ Emerg Hm Phone: _____

I. Have you ever been convicted of a felony? Yes No

If yes, explain: _____

II. Are you completing volunteer hours for community service? Yes No School / Youth Group / Other *Court Mandate

If court mandated, please state nature of offense: _____ # Hours: _____

*Ruby's Pantry has restrictions on types of court-mandated volunteers it can accept. You will need to provide documentation of cause before orientation. Documentation of hours completed will not be provided without this paperwork. Ruby's Pantry is required to run a background check on all volunteers. The site has the right to accept or deny any volunteer.

EXPERIENCE & RESTRICTIONS

Please list any of the following that may apply

Experience / Skills: _____

Medical / Physical Restrictions: _____

DISCLAIMER & SIGNATURE

Yes I grant full permission for Ruby's Heart/Ruby's Pantry to use any photographs, film, video or audio tapes of me performing volunteer work for any purpose Ruby's Pantry deems appropriate.
 No

I agree and **WILL NOT** hold Ruby's Heart/Ruby's Pantry, or their agents or representatives liable for injury or other damages incurred as a result of the job duties given to me as a volunteer. Though thoughtfully assigned, I understand that the final judgment of physical limitations per assignment is solely my responsibility. All food and/or items used for distribution are for donation purposes and/or the property of Ruby's Pantry and host site.

X _____ **X** _____
 Volunteer Signature Date Parent/Guardian (for youth 17 yrs. & younger) Date

Accepted and verified by Ruby's Pantry Staff _____ Date _____