

**Lubbock Meals on Wheels  
Volunteer Contract and  
Confidentiality Agreement**

I will volunteer at Lubbock Meals on Wheels without monetary compensation.

I have read and understand the responsibilities outlined in the Lubbock Meals on Wheels Volunteer Handbook.

I will sign out and report volunteer hours to the Volunteer Director.

When I want and need information or support, I will ask the appropriate person.

I will be aware of my commitment to Lubbock Meals on Wheels and will communicate to the Volunteer Director when my commitment is waning.

If I decide to discontinue my volunteer participation, or if I am unable to fulfill the responsibilities outlined in the Volunteer Handbook, I will notify the Volunteer Director and *return the Lubbock Meals on Wheel's name badge.*

**Confidentiality Agreement**

I understand that ALL information regarding cases, recipients, and staff is strictly confidential. Any questions should be directed to Lubbock Meals on Wheels staff. I also understand that confidential information is only given to me if it pertains to my volunteer duties and that no copies or originals of any confidential information must ever be removed from Lubbock Meals on Wheels offices. I further understand that, if I do not respect or maintain the confidentiality of all information given me through my volunteer duties, I am personally liable for its release and will be required to give up my volunteer position.

Volunteer Signature \_\_\_\_\_ Date \_\_\_\_\_

Volunteer Coordinator \_\_\_\_\_ Date \_\_\_\_\_