

Participant Release and Waiver of Liability

The Momentum Group dba Create Common Good (hereafter CCG), a 501(c)(3) non-profit organization organized and existing under the laws of the State of Oregon, is a program, whose mission is to provide job training and placement for persons with barriers to employment with the ultimate goal of self sufficiency. CCG also operates a food manufacturing facility to assist in the financial support of the organization's mission.

I, _____, the participant (volunteer, trainee, intern, or anyone not employed by CCG who participates in CCG activities), execute this Participant Release and Waiver of Liability in favor of CCG and it's boards of directors, officers, employees, interns and volunteers. A participant desires to perform services for and with CCG on a volunteer basis. The Participant understands he/she may be working with persons with barriers to employment (e.g., refugees & immigrants, persons exiting the prison system, persons exiting substance abuse programs, women rebuilding their lives post domestic violence, persons who are chronically homeless).

The participant freely and voluntarily, without duress, executes this Release under the following terms:

Waiver and Release. The Participant releases and forever discharges and hold harmless CCG from any claim or liability that the Participant may have against Create Common Good with respect to any bodily injury, personal injury, illness, death or property damage that may result from participation in CCG's operations. The Participant also understands that CCG does not assume any responsibility or obligation to provide financial or other assistance, including but not limited to: medical, health or disability insurance or care, in the event of injury, illness, death or property damage (see insurance requirements below).

Insurance. CCG does not carry or maintain, and expressly disclaims responsibility for providing any type of insurance, including but not limited to health, medical, disability, vehicle or liability insurance coverage for the Participant. EACH PARTICIPANT IS EXPECTED AND ENCOURAGED TO CARRY APPLICABLE INSURANCE PRIOR TO VOLUNTEERING WITH CCG. The Participant understands that he/she will be responsible (either covered by personal medical insurance, or personal finances) for any costs associated with a personal injury or illness.

Medical Treatment. Except as otherwise agreed to by CCG in writing and signed by the Chief Operating Officer, the Participant hereby releases and forever discharges CCG from any claim whatsoever which arises or may hereafter arise on account of any first-aid treatment or other medical services rendered in connection with an emergency during the Participant's time with CCG.

Assumption of Risk. The Participant understands that his/her time with CCG may include activities that may be hazardous to the Participant such as driving, working at the CCG Farm, working in the CCG production kitchen, etc., and will not hold CCG accountable or liable for any injury that unintentionally result from or that arises during time spent participating in CCG activities due to any underlying physical condition.

The Participant understands that inherent risks may be associated with activities at the CCG farm, including but not limited to cuts from using gardening implements (hoes, shovels, machetes and other garden hand tools), insect bites, injury due to contact with animals (rabbits, gophers, rock chucks, snakes – including rattlesnakes), sunburn, heat related illness (heat stroke, dehydration, heat exhaustion, heat rash), allergic reactions, injury due to uneven terrain (including sprained ankle, broken bones), scrapes, abrasions, splinters, blisters, paralysis and death. The Participant also understands that inherent risks may be associated with activities at the CCG Production Kitchen, including but not limited to cuts from using kitchen equipment (knives, hand

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tools, choppers, etc.), insect bites, burns from contact with equipment (stoves, ovens, hot pans, etc.), allergic reactions, injury due to slips, trips or falls (including sprained ankle, broken bones), scrapes, abrasions, splinters, blisters, paralysis and death.

Compensation. Participant understands that Create Common Good is a volunteer organization and that Participant is not acting as an employee of Create Common Good and will not receive compensation.

Date: _____

Please complete if participant is under 18

Participant's Name (Please Print)

Parent/Legal Guardian's Name (Please Print)

Participant's Signature

Parent/Legal Guardian's Signature

Photographic Release

Participant grants and conveys unto Create Common Good all right, title and interest in any and all photographic images and video or audio recordings made by Create Common Good during Participant's work for Create Common Good, including but not limited to, any royalties, proceeds or other benefits derived from such photographs or recordings.

Date: _____

Please complete if participant is under 18

Participant's Name (Please Print)

Parent/Legal Guardian's Name (Please Print)

Participant's Signature

Parent/Legal Guardian's Signature

Medical Treatment Authorization of a Minor

Parent(s)/Guardian(s), initial on one of the following:

_____ I/we give or _____ I/we do not give

Create Common Good (CCG) permission to authorize medical care for my child (the Participant).

If, in the reasonable judgment of CCG, the need arises such medical treatment shall be provided upon the advice and supervision of any physician, surgeon, dentist, or other medical practitioner licensed to practice in the United States.

Parent/Legal Guardian's Signature

Parent/Legal Guardian's Signature

Date

Date

CREATE COMMON GOOD

Exclusion Policy

It is the policy of Create Common Good to restrict or exclude employees/volunteers/trainees who are sick or have infected cuts or lesions. Employees/volunteers/trainees with these conditions shall inform the person-in charge. At that time, a decision will be made whether or not to exclude from service or restrict their activity based on the conditions. As employees/volunteers/trainees in the food service industry, you should be aware of the potential risks and hazards that your health plays in the public health of our community. Each case will be reviewed individually and handled, as the facility deems appropriate. This may result in different jobs or positions in the facility during the illness or condition and possibly the exclusion from work entirely. An employee/volunteer who has any of the following symptoms: Diarrhea, Fever, Vomiting, Jaundice, Sore Throat with Fever, Coughing or Running Nose, etc., will be excluded from the facility until the individual is symptom free.

Any employee/volunteer who is exposed to or diagnosed as being contagious with any of the following: Salmonella Typhi, Shigella ssp., E. Coli 0157:H7 or Hepatitis A virus, Norovirus, etc., will be excluded from work until documentation is provided from a licensed physician indicating the person is free of the infectious agent of concern. The person-in charge of the facility involved is also to contact the local health department, informing them of the diagnosis, and is to receive their approval prior to the employee/volunteer returning to work.

The following individuals have read and understand that they must report to the person-in charge any of the above-mentioned symptoms or illnesses.

Print Name

Date

Signature



Confidentiality Agreement

As an intern, volunteer, or trainee of Create Common Good (CCG) you may have access to “Confidential Information”. The purpose of this agreement is to help you understand your obligations regarding confidential information.

Confidential information means, but is not limited to, all data, materials, knowledge and information generated through, originating from, or having to do with CCG or persons associated with CCG’s activities. This includes, but is not limited to, plans, processes, recipes, reports, financials, business or strategic plans, compensations, donor lists and donors, customer lists and customers and any information relating to CCG’s staff, trainees, volunteers, interns, donors, and CCG operations and activities.

I, _____, understand that any direct or indirect disclosure of Confidential Information to anyone outside CCG would threaten the mission and operations of CCG, cause the public to lose trust in CCG and do damage to the organization and it’s mission.

I agree not to disclose or use any of the Confidential Information of CCG other than in the proper performance of my duties with CCG, unless an officer of Create Common Good provides prior written consent.

I agree that upon separation with CCG I will return all Confidential Information. Anything that cannot be returned will be completely destroyed, whether in hard-copy form or on intangible media, such as e-mail or computer files, in my possession.

I understand that this agreement has no expiration date unless the CEO of Create Common Good provides a written waiver of release.

Signature

Date