



An Arizona Nonprofit Corporation

## VOLUNTEER AGREEMENT

This Volunteer Agreement (“Agreement”) is made and entered into between the undersigned volunteer (“Volunteer”) and *The Kringle Cause, Inc.* (“the Organization”), an Arizona nonprofit corporation.

**WHEREAS**, the Volunteer desires to donate services to the Organization, and the Organization agrees to accept such voluntary services under the following terms:

### 1. Volunteer Role and Status

- Volunteer will donate services in the role of: \_\_\_\_\_  
(Volunteer Title/Role).
- It is understood that these services are provided without expectation of compensation, wages, or benefits.
- Volunteer acknowledges that they are not an employee of the Organization and will not receive any employee benefits, insurance coverage, or other compensation.

### 2. Direction, Training, and Conduct

- Volunteer agrees to follow all instructions, training, and policies provided by the Organization and its representatives.
- The Organization may terminate this Agreement and Volunteer’s assignment at any time and for any reason, with or without notice.

### 3. Liability and Reporting

- Volunteer understands that they may be held personally liable for injury or property damage caused while acting outside the scope of their assigned responsibilities.
- Volunteer agrees to immediately report to the Organization any incidents, injuries, or misconduct witnessed or experienced during their volunteer service.

- Volunteer agrees to cooperate fully with any investigation, legal inquiry, or internal review process conducted by the Organization or its agents.

#### **4. Confidentiality and Privacy Expectations**

- Volunteer understands and agrees to maintain the confidentiality of all non-public information acquired during their service, including information about beneficiaries, donors, partners, and internal operations.
- This includes compliance with privacy standards similar to HIPAA when visiting hospitals, care facilities, or engaging with beneficiaries whose personal medical or emotional details are shared—even with consent.
- Volunteer agrees to:
  - Never discuss or disclose a beneficiary’s condition, identity, or story outside authorized Organization activities.
  - Avoid sharing or referencing names or sensitive details in public, including conversations in common areas, elevators, or online.
  - Not photograph, copy, distribute, or share private documents or records related to the Organization or its beneficiaries.

#### **5. Digital Communication and Email Use**

- If granted access to an Organization email account or communication tools, the Volunteer will use such platforms exclusively for Organization-related tasks.
- Volunteers may not send emails or messages of a harassing, discriminatory, or offensive nature.
- Volunteers have no expectation of privacy when using Organization-provided accounts or systems.
- The Organization retains the right to review and access all communications made on its systems at any time.

#### **6. Continued Obligation After Termination**

- The obligations outlined in this Agreement, particularly those regarding confidentiality, remain in force even after the Volunteer ends their service with the Organization.

#### **7. Public Representation and Non-Disclosure of Organizational Leadership**

- Volunteer agrees not to give interviews, publish content, or publicly comment on internal matters of The Kringle Cause, Inc., including but not limited to organizational leadership, staff, or beneficiaries, without prior written consent from the Executive Director or Board.

- The term “Confidential Information” includes all non-public, proprietary, or sensitive information obtained during the course of service, including personal information about leadership, donors, staff, or volunteers.

### **8. Agreement and Legal Rights**

- Volunteer acknowledges they have been advised of their right to seek independent legal counsel prior to signing this Agreement.

By signing below, Volunteer agrees to abide by the terms set forth herein.

Executed this \_\_\_\_ day of \_\_\_\_\_, 2025

in the State of \_\_\_\_\_.

Volunteer Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_