



Neighbor Brigade Volunteer Handbook



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Welcome Letter

I. Welcome Letter

Welcome to the Neighbor Brigade Team!

On behalf of the entire Neighbor Brigade family of staff and volunteers, thank you for becoming a force of caring in your community. Neighbor Brigade Volunteers are the true backbone of Neighbor Brigade, facilitating temporary support for those affected by acute crises while strengthening the fabric of a community. Put simply, without individuals like you, there'd be no Neighbor Brigade.

Whether you are drawn to Neighbor Brigade to “pay forward” kindnesses extended to you and your family during a trying time of your own or if you seek a meaningful volunteer opportunity with the flexibility to schedule whenever and as often as you choose, we are confident you will receive as much as, if not more than, you give by becoming part of this large (and growing!) network of support.

This handbook is one of the many tools available to you during your tenure as a volunteer with Neighbor Brigade. We encourage you to visit our Volunteer Resources page on our website (<http://neighborbrigade.org>) as well, which is always available to you as a quick online reference with a wealth of templates, training videos and resource links.

We know we can't predict every question or challenge you might encounter while fulfilling your volunteer responsibilities so please don't hesitate to reach out to me as needed, and our Director of IT, Jennifer Stewart (support@neighborbrigade.org) is always available for any technical questions. Again, thank you for making this commitment to your community and Neighbor Brigade.

Warm regards,



Polly Mendoza

Neighbor Brigade “101”

II. Neighbor Brigade “101”

A. Mission and Vision

Mission

Neighbor Brigade establishes and mobilizes community-specific networks of volunteers to help residents facing sudden crises such as a devastating illness, accident, or other tragic event. Our volunteers provide non-medical, non-monetary services and collaborate with the shared purpose of helping fellow residents. Neighbor Brigade provides temporary support to those affected, while strengthening the fabric of a community.

Vision

Community members come together to support their neighbors and provide compassionate and immediate assistance to help those in a sudden crisis manage both their routine and emergency needs. Towns and communities become stronger as their residents unite and help one another through difficult times. Volunteers reap the benefits proven through lasting volunteer relationships that help their physical and mental health and increase their shared sense of community.

B. History



After suffering her first bout with cancer in 2002, our founder, Pam Manikas Washek, decided to turn her pain into purpose by helping others experiencing similar crises. She and her friend and fellow cancer survivor, Jean Seiden, first established the Wayland Angels to "pay forward" the acts of kindness they received from their own neighbors during their cancer treatments. In 2010, Pam transitioned Wayland Angels into the formally incorporated nonprofit Neighbor Brigade, a vehicle to give people in communities beyond Wayland a means to support their fellow neighbors when serious illness or other tragedy strikes.

Pam lost her battle with cancer in 2012, but her legacy lives on in Neighbor Brigade. Pam's Run is an annual event that was established in 2013 to first and foremost remember Pam and the amazing life she led, but also to raise supporting funds for Neighbor Brigade. Held in October in Wayland, Pam's Run brings together her family, friends, old and new supporters of Neighbor Brigade and enthusiasts who compete in a 5k / 10k run and walk. It is a beautiful community event that we hope you will enjoy and participate in! More information on Pam's Run can be found at <http://www.pamsrun.com>.

C. Why Neighbor Brigade?

Pam understood our shared human need for community and our need to care for and be cared for by one another. She believed it was imperative not only for those who need the assistance, but for volunteers' benefit as well.

D. Organizational Impact

Our founder's charismatic, grassroots, can-do approach lit a spark that spread beyond her home chapter of Wayland to include a network of Neighbor Brigade Chapters. Each year, Neighbor Brigade's 3000+ volunteers carry out thousands of "acts of kindness"—meals delivered, rides provided, dogs walked, errands run—on behalf of neighbors in need. In 2016, we have 22 active Chapters across Massachusetts.

As delighted as we are by these figures, our volunteers, staff and Board of Directors are confident that Neighbor Brigade is capable of spreading even more acts of goodness throughout our communities. We rely heavily on Chapter Leaders and Chapter Volunteers to lead our efforts to reach potential recipients and volunteers alike as we continue to add capacity within our existing chapters and expand into new communities.

E. Organization Chart and Responsibilities

Neighbor Brigade is a lean organization that relies heavily on volunteers at all levels of engagement. We are led by a volunteer board of directors who oversee a small, specialized staff who provide support in the areas of program management, public relations, outreach, finances, information technology and development. Ultimately, Chapter Leaders report to our Executive Director for administrative concerns and to our Director of IT for any concerns related to our software. Our volunteers report to their Chapter Leader, however they can also reach out to our Executive Director and Director of IT as well.

F. Financial Transparency

Neighbor Brigade is a registered 501(c)3 non-profit organization. 100% of our budget comes from year-round fundraising efforts that include, but are not limited to, an annual appeal, Pam's Run 5k/10k run and walk, online fundraising campaigns and grant writing. The money raised covers overhead costs such as liability insurance, legal counsel, our software management program, accounting oversight, central staff salaries, marketing, design and printing costs, mail and various other expenses. As a non-profit organization we report to the IRS by completing annually the form 990 which can be seen upon request by any of our stakeholders. Occasionally fundraising efforts are marked as restricted funds for specific Chapters, meaning that in some cases those funds can only be used for individual Chapter-specific purposes. In those scenarios our central staff work closely with the Chapter Leaders of the town that has received the funds to see how we can best utilize the designated donation. For example, those funds might be used for meal cards to provide take-out meals for recipients in those towns, for coolers to ease meal delivery, for communications materials that support that individual Chapter, etc.



Program Overview

III. Program Overview

A. How It Works

Neighbor Brigade transforms local communities into caring centers by mobilizing residents to provide free, temporary, non-medical support to those who are experiencing an unexpected emergency such as a **critical illness, accident, or family tragedy**. Our programs provide temporary support to those affected by acute crisis while strengthening the fabric of a community. Neighbor Brigade services are **immediate, free and available to all**.

By engaging a “neighbors helping neighbors” model we supplement where immediate family and friends cannot “do it all” in meeting the daily household needs of those experiencing a sudden crisis. Community-specific chapter leaders together with our volunteers use our volunteer management software, Better Impact, to fulfill the requests for services submitted by recipients experiencing a sudden crisis. If a recipient is not comfortable with technology they also have the option to call our central line to submit a request for services. Our goal is to respond to requests within 24 hours and to meet 100% of requests that fall under our service parameters.

B. Neighbor Brigade Service Guidelines and Parameters

i. What we do

a. Meal delivery

Meal delivery is one of our most common requests that we fulfill. Requirements for a volunteer to fulfill a meal request include acknowledging that you have read and understood the .pdf document: [A volunteer guide to food safety by](#)

[the USDA](#). A recipient, referred to as a client in our software system, will give specific details about quantity, frequency and any dietary concerns including allergies for their food request. If a volunteer has chosen to fulfill a request made by a client that has noted they have a food allergy, the volunteer must also acknowledge that they have read and understood the pdf document: [A Field-Guide for Food Allergies by FARE](#). When preparing for a meal, volunteers can refer specifically to pages 13 and 14 of the Field Guide, also available in [Appendix A](#) of this Handbook. When food allergies exist, we also require that a [Meal Preparation Form](#) or similar be filled out to include a list of all ingredients in the meal and attached to the container that the meal is stored in. Please note that volunteers do NOT need to complete a CORI (Criminal Offender Record Inquiry) for fulfilling a meal delivery request. A client/recipient of ours who has only requested a meal delivery also has not undergone a CORI check and we advise volunteers not to enter into a recipient's home who has not had a CORI check; if a volunteer does so, they assume the risk.

All food should be delivered in containers with closed lids that volunteers will leave for the client to keep. Plastic or glass containers are most commonly used and each container should have a label explaining what the food is and any rewarming instructions if needed. If the family has listed a food allergy, volunteers should include on the food label a list of all ingredients used. Clients will leave a cooler outside their door where volunteers will drop-off the meal they have prepared. Volunteers should not ring the doorbell (unless specified in the online request that you should) as we want to respect our clients' privacy during this difficult time. Some clients will choose to greet volunteers and speak with them. Volunteers are also more than welcome to leave a brief note along with their food delivery to express their thoughts and well wishes for the recipient.

b. Rides to medical appointments

Many of our clients are suffering from illnesses and accidents that make it difficult for them to drive to their treatments and medical appointments. Helping them with this task is greatly appreciated. Requirements for a volunteer to fulfill a task that includes transportation, as mentioned in our [Participant Agreement and Liability Release Waiver](#) are:

- Maintain, and upon request provide evidence of, volunteer's current status as a licensed driver in good standing



- Adhere to all instructions and directions provided to volunteer by Neighbor Brigade and the Neighbor Brigade Volunteer Handbook
- Promptly notify Neighbor Brigade of any physical conditions, vehicle defects, or road conditions that might affect volunteer's safety or the safety of others
- If involved in an accident, complete an [accident report \(See APPENDIX B for sample accident report\)](#) and cooperate with the authorities and Neighbor Brigade
- If volunteer's vehicle is used for Neighbor Brigade activities, maintain current and adequate insurance coverage. The Volunteer understands that the limits and coverage provided by the Volunteer's personal automobile insurance are applicable to any accidents or incidents that involve the Volunteer's vehicle, including those that occur while volunteer is serving as a volunteer driver. Adequate insurance coverage includes at a minimum Collision coverage and preferred is Comprehensive coverage. If involved in an accident, the Volunteer is responsible for covering Volunteer's deductible and any costs incurred from the accident.

A volunteer driver is required to have a criminal record check completed by Neighbor Brigade. A client is required to give as many details as possible about their need for transportation including if someone else will be joining or stay with them due to their personal needs for assistance (translation, anxiety with doctors, etc.). If a volunteer has not been informed that another person, in addition to the client, will be traveling with them in the car and someone shows up, we strongly advise that the volunteer does not fulfill the transportation request because we have not vetted that additional person. If a volunteer ever does not feel safe or comfortable around a client or people that accompany them, the volunteer has the right to discontinue their volunteer service at any point in time. In such a scenario we ask the volunteer to please give as many details as possible to the Executive Director and/or Chapter Leader so that we do not place future volunteers in a similar situation.

c. Light errands and chores

Many of our clients are suffering from illnesses and accidents that make it difficult for them to accomplish basic household chores like taking out the trash, shoveling snow, mowing the grass, vacuuming, picking up groceries, picking up medications, etc. If driving is involved in the task, the same requirements must be fulfilled as mentioned above in the section b. "Rides to Medical appointments". If the chores are strictly performed outside of the house, and not in contact with the recipient, a background check is required neither by

the volunteer nor by the client. If the chores are performed inside the house both the volunteer and the client must complete a CORI check. If any children will be present at the house during the time of the chores, a SORB (Sex Offender Registry Board) check must be performed on the volunteer.

d. Pet-care (non-boarding)

Many of our clients are suffering from illnesses and accidents that make it difficult for them to care of their pets. Tasks approved under pet-care include feeding the animals and taking them on walks or simply taking them outside to go to the bathroom. Clients must specify what type of pet they have and a client with a dog breed that is considered large or dangerous (American Pit Bull Terrier, German Shepherd, Rottweiler, Doberman Pinscher, Bullmastiff, Cane Corso, Great Dane, Wolf Hybrid mix, American Bandogge, Husky, Chow, Boxer) must carry homeowner's insurance. The owner of the pet generally provides leashes, poop scoopers and poop bags if the task includes walking the pet. Because pet-care can involve entering a house, a CORI check is required for both the volunteer and the client.

C. What we don't do

Neighbor Brigade does not provide medical services, respite care, or any services that relate to a situation that is purely due to financial difficulties. The crisis situation must be temporary by nature. On average the individuals we help need assistance from 1-3 months. Some scenarios exist where someone only needs help for one week, while other more uncommon scenarios exist when someone needs help for closer to one year. Some of our clients are repeat clients because they have a recurring illness or a new crisis with which they need assistance.

D. Who we can serve

It is the policy of Neighbor Brigade to provide services to all applicants without discrimination or harassment on the basis of race, color, religion, sex, sexual orientation, gender identity or expression, age, disability, marital status, citizenship, genetic information, or any other characteristic protected under the laws of the United States of America. Crises that fall under a temporary situation include but are not limited to our following categories: general illness, cancer, accident, death in family and injury. We also have a miscellaneous category if someone's temporary crisis does not fall under one of those categories and is not related to finances. While we use an online software task management program for our clients, our program is available to people who do not have access to or knowledge of use of computers. If you know of someone who needs services who does not speak English, please let us know and we will do our best to match that person with a volunteer who speaks their native language, as well as provide

as much written material in their native language as possible.

E. Who we cannot serve

Neighbor Brigade cannot serve anyone who requires continuous longer-term assistance or assistance related primarily to their financial situation. The most common confusion is someone who requests help because they need assistance strictly due to their age and unfortunately that does not fall under our parameters as a temporary situation. We cannot work directly with volunteers who are under the age of 14 however if a volunteer's children are under the age of 14 and would like to assist in some of the tasks, such as preparing meals at the volunteer's own home, we of course welcome that generosity under the supervision of an adult. We cannot work with anyone who does not sign our waivers and for required tasks does not pass a CORI or SORB inquiry.

Chapter Leaders

IV. Chapter Leader Commitments

A. Position Description

A Chapter (which is generally a town or city, or two neighboring small towns) is managed by one to three individuals called Chapter Leaders. Chapter Leaders are volunteers who dedicate their time and energy to make their towns stronger and are the heart of Neighbor Brigade. Chapter Leaders manage all of the volunteers in their specific town and are often the first point of contact for a client who is in need of receiving our services. A Chapter Leader is someone who can dedicate 1-5 hours a week on average managing their Chapter. The rate of activity in a Chapter can often depend on the size of the town, the time of year, other available resources in that town, and the outreach efforts that have been made in that community to publicize Neighbor Brigade.



A Chapter Leader is not an employee of Neighbor Brigade and is not compensated monetarily. There are times when Chapter Leaders participate in outreach efforts and certain costs are incurred that may be covered by Neighbor Brigade. Those potential costs need to be pre-approved by the Neighbor Brigade Executive Director and all original receipts need to be submitted for reimbursement. An example would be if a Chapter wants to participate in a local resource fair and there is a fee to host a table where brochures can be passed out. Please see our Chapter Volunteer position description for important information regarding reporting direct volunteer expenses to the IRS.

Chapter Leaders are responsible for raising awareness about Neighbor Brigade in their community. Schools, medical facilities, police and fire departments, farmer's markets, senior centers, and newcomer's clubs are examples of great places to distribute Neighbor Brigade Rack Cards. Often times local newspapers are eager to learn about our stories of neighbors helping neighbors and getting published is an ideal form of publicity to increase numbers of volunteers and recipients in your town.

If a Chapter Leader engages in communication with reporters for any publications, we require those Chapter Leaders do so in collaboration with the Executive Director of Neighbor Brigade. Please see [section C. Public Relations](#) for further information.

Some Chapters collaborate throughout the year with other local organizations like food pantries, senior centers, schools and clubs (Lions, Rotary, etc.). Working with other organizations in group engagement projects has multiple benefits including the ability to reach more people, combined financial support, and a stronger sense of community and engagement on behalf of all volunteers. Often times, Neighbor Brigade Chapters can also participate in “drives” with other organizations for example the local food pantry may have a pie drive for Thanksgiving when Neighbor Brigade Chapter Leaders can enlist their Chapter to fulfill the baking of 50 pies. Other drives that we have done are backpacks for kids going back to school, Easter baskets, gift cards for the holidays, and many more. There is a Volunteer Resources section on our website where Chapter Leaders can learn about what other Chapters are doing as well as ways to communicate with other Chapter Leaders. From time to time, we also have get-togethers where Chapter Leaders will have the opportunity to meet other Chapter Leaders and share ideas or ask questions about certain scenarios they are seeing in their town.

Our Software Training Manual and Software Training Videos will teach Chapter Leaders how to use our volunteer software management program, Better Impact. Our Director of Information Technology, Jennifer Stewart, along with the Better Impact IT team are here to help you any time you have questions in regards to using or accessing the software.

To give a better idea of the Chapter Leader position, responsibilities include but are not limited to:

- i. Complete the initial Chapter Leader Orientation and Software Training.
- ii. Assist potential clients/recipients with the application process to request help. If someone makes a request over the phone, they or someone they know should set-up an online profile for them to receive services. This also allows the client to view a schedule of services.
- iii. Remind volunteers that they need to login to submit their hours for the services they have performed. This can now be done from a user’s smartphone!
- iv. Frequently communicate with volunteers to keep them motivated, inspired and aware of volunteer opportunities in the Chapter.
- v. Clients and volunteers will often have questions and concerns; the Chapter Leader is a key player in answering those frequently asked questions or

- guiding them in the right direction to find the answers.
- vi. Stay informed about software updates and new enhancements that our Better Impact software will have from time to time.
 - vii. Promote Neighbor Brigade in their town to acquire new volunteer and new clients as well as partnerships with local organizations.
 - viii. Seek Co-Chapter Leaders to share tasks and be proactive with succession planning for your position.

B. Confidentiality

Chapter Leaders and volunteers that sign-up for specific tasks might be made aware of confidential and sensitive information in regards to people's health and personal information. In accordance with HIPAA laws and out of general respect for the people we serve, all Neighbor Brigade volunteers, by acknowledging they have read this handbook, agree to maintaining the confidentiality of any health or personal information relevant to our clients/recipients and agree to implement appropriate safeguards (i.e. passwords to login to their computer) to prevent further use or disclosure of any confidential Information that is incidentally or inadvertently accessed.

C. Public Relations

Neighbor Brigade actively participates in public relations and marketing initiatives to promote the programs and mission of Neighbor Brigade. This includes, but is not limited to, social media channels, e-newsletters, updates on our website, media publications and press releases, video productions, and presentations to small and large audiences. The stories of volunteers and clients are beneficial to the promotion of Neighbor Brigade's cause and by signing our Communications and Media Waiver in our Volunteer Application ([See APPENDIX D for all waivers](#)) volunteers are agreeing to the use of their "story". ***Neighbor Brigade will always contact an individual for a case-by-case approval and to request that any details related to them are approved to be shared with the public.***

D. Term of service

We ask for a minimum of a 2-year commitment to being a Chapter Leader. We also strongly advise that there are a total of one to three individuals serving as Chapter Leaders to help distribute the quantity of work and to allow each Chapter Leader true vacation breaks when they do not need to be responsible for any Chapter

Leader duties at that time. We advise that Chapter Leaders retire in staggering times so that all current Chapter Leaders do not step-down at the same point in time.

E. Succession Planning

Chapter Leaders need to consider how long they would like to be in their Chapter leadership role and communicate with the Executive Director as soon as they feel it is a good time to step down. We understand that people's lives change and sometimes those decisions happen at the last minute but the more a Chapter Leader can plan ahead the better the chance the town's Chapter will thrive in the future. Ideally, a Chapter Leader would reach out to their Chapter volunteers and see if any current volunteers would like to step-up into the position. Hopefully the other Co-Chapter Leaders would agree to stay in their positions for at least another year so that they can work and train new Chapter Leaders.

Throughout tenure as a Chapter Leader we would like leaders to retain important emails, contacts and resources that will be beneficial to share with future Chapter Leaders. Institutional history of a Chapter will greatly benefit future leaders and will avoid the need to reinvent the wheel every time new Chapter Leaders come into their roles.

Volunteers

V. Volunteers

A. Position Description

Volunteers together with Chapter Leaders are the heart and soul of Neighbor Brigade. They are the face of the organization and are people who do generous acts of kindness in their communities on a regular basis. Chapters vary in size and can begin with as few as 5 volunteers and will often grow to have numbers in the hundreds. More so than the Chapter Leader position, the Chapter Volunteer is an incredibly flexible position that allows a person to sign up for tasks once a week or once a year depending on their availability. The rate of activity in a Chapter can often depend on the size of the town, the time of year, other available resources in that town, and the outreach efforts that have been made in that community to publicize Neighbor Brigade. The amount of tasks that are made available to a specific volunteer depend on their interests, availability and qualifications (e.g. valid driver's license or CORI checks) that are chosen when they set-up their online profile in our software management system.

A Chapter Volunteer is not an employee of Neighbor Brigade and is not compensated monetarily. Volunteers will be using their own financial resources to purchase the food to prepare meals, purchase containers to deliver the food, gas to drive clients to their destinations, as well as other various costs incurred by a volunteer's service and of course their precious time and energy are of great value as well. Volunteers will be asked to submit their hours when they sign-up for tasks in our software management system. Students ages 14 and older may participate in our programs as a volunteer and use their hours for necessary school community service hours. While a volunteer's time has immeasurable value to Neighbor Brigade, volunteers cannot deduct the value of their time or services with the IRS. **However when completing the annual tax return with the IRS, volunteers CAN deduct their direct out-of-pocket costs related to the services they are performing** ([See APPENDIX C for page 5 of the following document for more details: https://www.irs.gov/pub/irs-pdf/p526.pdf](https://www.irs.gov/pub/irs-pdf/p526.pdf)). Valid deductible costs that volunteers can report to the IRS as an in-kind donation include but are not limited to: the cost of food a volunteer purchased to prepare a meal,

the cost of containers a volunteer provides, gas mileage for driving someone to a doctor's appointment, parking fees or tolls incurred while driving a client. Invalid deductible costs include but are not limited to a volunteer's car insurance premium or electric/gas bill for a volunteer's stove to prepare food.

Volunteers can help raise awareness about Neighbor Brigade in their community. Whether a volunteer talks about Neighbor Brigade at their work, school, religious or social group, bank or other location in the community, volunteers are an ambassador for Neighbor Brigade at all times. Volunteers can help increase the number of future volunteers by talking about their experience, and volunteers might be aware of individuals that are in need of our free services. As mentioned in the Volunteer Application under Trademark and Copyright Usage: volunteers agree to perform all volunteer activities, including those that involve use of the Licensed Marks, in accordance with the highest standards of quality and care. In the course of participating in Neighbor Brigade activities, volunteers will not act in any manner that would be detrimental to Neighbor Brigade and will avoid any actions that might impair the reputation of Neighbor Brigade. At all times, volunteers will comply with all applicable laws, regulations and legal standards and any policies, instructions or guidelines provided by Neighbor Brigade.

B. Confidentiality

Volunteers that sign-up for specific tasks might be made aware of confidential and sensitive information in regards to people's health and personal information. In accordance with HIPAA laws and general respect for the people we serve, all Neighbor Brigade volunteers, by acknowledging they have read this handbook, agree to maintaining the confidentiality of any health or personal information relevant to our clients/recipients and agree to implement appropriate safeguards (i.e. passwords to login to a computer) to prevent further use or disclosure of any confidential information that is incidentally or inadvertently accessed.

C. Public Relations

Neighbor Brigade actively participates in public relations and marketing initiatives to promote the programs and campaigns of Neighbor Brigade. This includes but is not limited to, social media publications, e-newsletters, updates on our website, media publications and press releases, video productions, and presentations to small and large audiences. The stories of volunteers and clients are beneficial to the promotion of Neighbor Brigade and by signing our Communications

and Media Waiver in our Volunteer Application ([See APPENDIX D for all waivers](#)) volunteers are agreeing to the use of their "story". ***Neighbor Brigade will always contact an individual for a case-by-case approval and to request that any details related to them are approved to be shared with the public.***

Clients

VI. Clients

A. Application Process

Recipients of our services, who are referred to as Clients in our software program, are asked to fill out as much relevant information as possible in regards to their crisis as well as the support they need. If at any time a client will be in contact with a volunteer, a CORI check will be run on both individuals.

Similar to volunteers, clients are asked to sign a waiver stating they “agree to assume any and all risks incidental to the free services provided by Neighbor Brigade. In addition, the client hereby waives, releases, absolves, indemnifies, and agrees to hold harmless Neighbor Brigade, its officers, directors, members, volunteers, and their assigns, from any and all liability, claims, damages, or other actions arising out of any injury to their person or property, whether resulting from negligence or any other cause, in the course of the receipt of services from Neighbor Brigade.”

Clients who sign-up for meal delivery are asked to give important details about food preferences and food allergies and volunteers preparing those meals are expected to be 100% compliant with those requests. Volunteers have a [Meal Preparation Form](#) they will fill out which includes all ingredients in a meal prepared if allergies are involved.

Clients who sign-up for transportation services are made aware that challenges such as weather, traffic and road conditions are not under our control and may result in tardy arrivals. Volunteers that sign-up for transportation are expected to do their absolute best in getting a client to their requested destination on time. Volunteers will pay for all gas costs, tolls, parking fees and other transportation fees and **should not accept any money from a client for our free services.**

B. Notes

Please see the [“Who we can serve” section](#) to best understand who our recipient are. When using our software, there is a way to leave notes that are important for future volunteers to know about a recipient and/or their family members. When leaving notes please be as objective as possible and only leave information that will truly help anyone that needs to work with that individual in the future.

C. How to Graduate Recipients

Sometimes recipients/clients can become very comfortable using our services and need encouragement to move forward and be completely independent once again. This, of course, is a delicate situation and one that a Chapter Leader is welcome to consult with the Executive Director about at any time to make a judgment call.

D. Importance of making referrals—“No, but...”

We cannot fulfill every request for services as many of the requests do not fall under our parameters of services. If we are not able to fulfill a request, it is our policy to try our best to guide people in the right direction for the services they need.

Chapter Leaders and volunteers over time will become aware of various resources available to residents in their town. Chapter Leaders are asked to maintain a list of local resources and share those resources with people who request help that falls outside of our service parameters. Chapter Leaders can always suggest that the person call the Executive Director to discuss more referral options. Chapter Leaders and volunteers are asked to share their referral resources with the Executive Director of Neighbor Brigade so that those resources are made available to other Chapters as well.



Appendix

VII. APPENDIX

A. A Field Guide for Food Allergies pages 13 and 14

Reproduced from: <http://www.foodallergy.org/file/field-guide.pdf>

An Excerpt from **FARE'S Food Allergy Guide** (copyright 2015), page 13-14. Retrieved from <http://www.foodallergy.org/field-guide>

Tips for Avoiding Your Allergen

- All FDA-regulated manufactured food products that contain a "major food allergen" (milk, wheat, egg, peanuts, tree nuts, fish, crustacean shellfish, and soy) as an ingredient are required by U.S. law to list that allergen on the product label. For tree nuts, fish and crustacean shellfish, the specific type of nut or fish must be listed.
- Read all product labels carefully before purchasing and consuming any item.
- Be aware of unexpected sources of allergens, such as the ingredients listed below.
- *Note: This list does not imply that the allergen is always present in these foods; it is intended to serve as a reminder to always read the label and ask questions about ingredients.

For a Milk-Free Diet

Avoid foods that contain milk or any of these ingredients:

butter, butter fat, butter oil, butter acid, butter ester(s)	lactalbumin, lactalbumin phosphate	solids, whole)
buttermilk	lactoferrin	milk protein hydrolysate
casein	lactose	pudding
casein hydrolysate	lactulose	Recaldent®
caseinates (in all forms)	milk (in all forms, including condensed, derivative, dry evaporated, goat's milk and milk from other animals, lowfat, malted, milkfat, nonfat, powder, protein, skimmed,	rennet casein
cheese		sour cream, sour cream solids
cottage cheese		sour milk solids
cream		tagatose
curds		whey (in all forms)
custard		whey protein
diacetyl		hydrolysate
ghee		yogurt
half-and-half		

Milk is sometimes found in the following:

artificial butter flavor	culture and other bacterial cultures	nisin
baked goods	luncheon meat, hot dogs, sausages	nondairy products
caramel candies	margarine	nougat
chocolate		
lactic acid starter		

Keep the following in mind:

- Individuals who are allergic to cow's milk are often advised to also avoid milk from other domestic animals. For example, goat's milk protein is similar to cow's milk protein and may, therefore, cause a reaction in individuals who have a milk allergy.

For an Egg-Free Diet

Avoid foods that contain eggs or any of these ingredients:

albumin (also spelled albumen)	livetin	vitellin
egg (dried, powdered, solids, white, yolk)	lysozyme	words starting with "ovo" or "ova" (such as ovalbumin)
eggnog	mayonnaise	
globulin	meringue (meringue powder)	
	sunmi	

Egg is sometimes found in the following:

baked goods	fried rice	mestizo or meatballs
breaded items	ice cream	nougat
drink foam (alcoholic, specialty coffee)	lecithin	pasta
egg substitutes	marzipan	
	marshmallows	

Keep the following in mind:

- Individuals with egg allergy should also avoid eggs from duck, turkey, goose, quail, etc., as these are known to be cross-reactive with chicken egg.
- While the whites of an egg contain the allergenic proteins, patients with an egg allergy must avoid all eggs completely.

For a Wheat-Free Diet

Avoid foods that contain wheat or any of these ingredients:

bread crumbs	protein, instant, pastry, self-rising, soft wheat, steel ground, stone ground, whole wheat)	semolina
bulgur		spelt
canola extract		sprouted wheat
club wheat		triticale
couscous		vital wheat gluten
cracker meal	hydrolyzed wheat protein	wheat (bran, durum, garrn, gluten, grass, malt, sprouts, starch)
durum	Kamut®	wheat bran hydrolysate
einkorn	matzoh, matzoh meal (also spelled as matzo, matzah, or matza)	wheat germ oil
emmer		wheat grass
farina		wheat protein isolate
flour (all purpose, bread, cake, durum, enriched, graham, high gluten, high	seitan	whole wheat berries

Wheat is sometimes found in the following:

glucose syrup	soy sauce	sunmi
oats	starch (gelatinized starch, modified starch, modified food starch, vegetable starch), vegetable starch)	

For a Soy-Free Diet

Avoid foods that contain soy or any of these ingredients:

edamame	soy protein (concentrate, hydrolyzed, isolate)
miso	shoyu
natto	soy sauce
soy (soy albumin, soy cheese, soy fiber, soy flour, soy grits, soy ice cream, soy milk, soy nuts, soy sprouts, soy yogurt)	tamari
soya	tempeh
soybean (curd, granules)	textured vegetable protein (TVP)
	tofu

Soy is sometimes found in the following:

Asian cuisine	vegetable gum
vegetable broth	vegetable starch

Keep the following in mind:

- The FDA exempts highly refined soybean oil from being labeled as an allergen. Studies show most allergic individuals can safely eat soy oil that has been highly refined (not cold pressed, expeller pressed, or extruded soybean oil).
- Most individuals allergic to soy can safely eat soy lecithin.
- Follow your doctor's advice regarding these ingredients.

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A. A Field Guide for Food Allergies pages 13 and 14 (cont.)

Reproduced from: <http://www.foodallergy.org/file/field-guide.pdf>

Tips for Avoiding Your Allergen



For a Shellfish-Free Diet

Avoid foods that contain shellfish or any of these ingredients:

barneacle	lobster (<i>langouste</i> ,	prawns
crab	<i>langoustine</i> , <i>Moreton</i>	shrimp (<i>crevette</i> ,
crayfish (<i>crawdad</i> ,	<i>bay bugs</i> , <i>scampi</i> ,	<i>scampi</i>)
<i>crayfish</i> , <i>ecrevisse</i>)	<i>tourmelley</i>)	
krill		

! Mollusks are not considered major allergens under food labeling laws and may not be fully disclosed on a product label.

Your doctor may advise you to avoid mollusks or these ingredients:

abalone	limpet (<i>lapas</i> , <i>opihii</i>)	sea cucumber
clams (<i>cherrystone</i> ,	mussels	sea urchin
<i>gooduck</i> , <i>littleneck</i> ,	octopus	snails (<i>escargot</i>)
<i>pismo</i> , <i>quahog</i>)	oysters	squid (<i>calaman</i>)
cockle	periwinkle	whelk (<i>Turban shell</i>)
cuttlefish	scallops	

Shellfish are sometimes found in the following:

bouillabaisse	fish stock	surimi
cuttlefish ink	seafood flavoring (e.g.,	
glucosamine	<i>crab or clam extract</i>)	

Keep the following in mind:

- Any food served in a seafood restaurant may contain shellfish protein due to cross-contact.
- For some individuals, a reaction may occur from inhaling cooking vapors or from handling fish or shellfish.

For a Peanut-Free Diet

Avoid foods that contain peanuts or any of these ingredients:

artificial nuts	goobers	nut meat
beer nuts	ground nuts	peanut butter
cold pressed, expeller	mixed nuts	peanut flour
pressed, or extruded	monkey nuts	peanut protein
peanut oil	nut pieces	hydrolysate

Peanut is sometimes found in the following:

African, Asian	baked goods (e.g.,	enchilada sauce
(especially	<i>pastries</i> , <i>cookies</i>)	marzipan
<i>Chinese</i> , <i>Indian</i> ,	<i>candy (including</i>	mole sauce
<i>Indonesian</i> , <i>Thai</i> ,	<i>chocolate candy</i>)	nougat
<i>and Vietnamese</i>), and	chili	
Mexican dishes	egg rolls	

Keep the following in mind:

- Mandelonas are peanuts soaked in almond flavoring.
- The FDA exempts highly refined peanut oil from being labeled as an allergen. Studies show that most allergic individuals can safely eat peanut oil that has been highly refined (not cold pressed, expeller pressed, or extruded peanut oil). Follow your doctor's advice.
- A study showed that unlike other legumes, there is a strong possibility of cross-reaction between peanuts and lupine.
- Arachis oil is peanut oil.
- Many experts advise patients allergic to peanuts to avoid tree nuts as well.
- Sunflower seeds are often produced on equipment shared with peanuts.
- Some alternative nut butters, such as soy nut butter or sunflower seed butter, are produced on equipment shared with other tree nuts and, in some cases, peanuts. Contact the manufacturer before eating these products.

For a Tree-Nut-Free Diet

Avoid foods that contain nuts or any of these ingredients:

almond	hickory nut	nut pieces
artificial nuts	litchi/lychee/lychee nut	pecan
beechnut	macadamia nut	pesto
Brazil nut	marzipan/almond paste	pili nut
butternut	Nangai nut	pine nut (<i>also referred</i>
cashew	natural nut extract	<i>to as Indian</i> , <i>pignoli</i> ,
chestnut	(e.g., <i>almond</i> , <i>walnut</i>)	<i>pignolia</i> , <i>pignon</i> ,
chinquapin nut	nut butters (e.g.,	<i>pifon</i> , <i>and pinyon</i>
coconut*	<i>cashew butter</i>)	<i>nut</i>)
filbert/hazelnut	nut meal	pistachio
gianduja (<i>a chocolate-</i>	nut meal	praline
<i>nut mixture</i>)	nut paste (e.g., <i>almond</i>	shea nut
ginkgo nut	<i>paste</i>)	walnut

Tree nuts are sometimes found in the following:

black walnut hull	nut distillates/alcoholic	walnut hull extract
extract (flavoring)	extracts	(flavoring)
natural nut extract	nut oils (e.g., <i>walnut</i>	
	<i>oil</i> , <i>almond oil</i>)	

Keep the following in mind:

- Mortadella may contain pistachios.
- There is no evidence that coconut oil and shea nut oil/butter are allergenic.
- Many experts advise patients allergic to tree nuts to avoid peanuts as well.
- Talk to your doctor if you find other nuts not listed here.
- * Coconut, the seed of a drupaceous fruit, has typically not been restricted in the diets of people with tree nut allergy. However, in October of 2006, the FDA began identifying coconut as a tree nut. Medical literature documents a small number of allergic reactions to coconut; most occurred in people who were not allergic to other tree nuts. Ask your doctor if you need to avoid coconut.

For a Fish-Free Diet

Fish is sometimes found in the following:

barbecue sauce	fish oil	pizza (<i>anchovy topping</i>)
bouillabaisse	fish sauce imitation fish	roe
Caesar salad	or shellfish isinglass	salad dressing
caviar	lutefisk maw, maws	seafood flavoring
deep fried items	(<i>fish maw</i>)	shark cartilage
fish flavoring	fish stock	shark fin
fish flour	fishmeal	surimi
fish fume	nuoc mam (<i>Vietnamese</i>	sushi, sashimi
fish gelatin (<i>kosher</i>	<i>name for fish sauce</i> ;	Worcestershire sauce
<i>gelatin</i> , <i>marine</i>	<i>beware of other ethnic</i>	
<i>gelatin</i>)	<i>names</i>)	

Keep the following in mind:

- If you have fish allergy, avoid seafood restaurants. Even if you order a non-fish item off the menu, cross-contact of fish protein is possible.
- Asian cookery often uses fish sauce as a flavoring base. Exercise caution when eating this type of cuisine.
- Fish protein can become airborne in the steam released during cooking and may cause an allergic reaction. Stay away from cooking areas when fish is being prepared.

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B. Meal Prep Printout



We hope this meal makes your days easier and your hearts stronger.

We have prepared the following meal for you:

Ingredients used in this meal:

Notes or heating instructions:

<http://www.neighborbrigade.org>

phone: 781-325-8580



C. Vehicle Accident Report



Neighbor Brigade Accident Form For Volunteers & Clients

Name of injured: _____ Injured person is: Volunteer Client
 Other
Address: _____ Telephone: _____
Date of injury: _____ Time of injury: _____

Describe what happened: _____

Name of Witness 1: _____ Telephone: _____
Name of Witness 2: _____ Telephone: _____

Where did incident occur? _____
Task at time of injury: _____

What action was taken?
 Police or 911 were called
 Sent home
 Sent to physician
 Sent to emergency room
 Admitted to hospital
 Other, describe: _____

Name & location of physician/facility:

If Police, EMT or Fire Officials were involved please include as much contact information as possible including name, town, title, telephone, etc.

STATEMENT: The facts as stated are true to the best of my knowledge and belief. I authorize the release of medical information pertinent to this incident to Neighbor Brigade.

Signature of injured: _____ Date: _____
Signature of person submitting report: _____ Date: _____
Printed name of person submitting report: _____

Please return immediately to Neighbor Brigade in one of the following ways:

1. Scan and email to info@neighborbrigade.org
2. or Fax to toll free number (844)799-8811
3. or Mail to Neighbor Brigade PO Box 248 Lexington MA 02420



D. IRS explanation of how to report out-of-pocket expenses

An Excerpt from *IRS 2015 Publication 526, Charitable Contributions* (copyright 2015), page 5. Retrieved from <https://www.irs.gov/pub/irs-pdf/p526.pdf>

Table 2. **Volunteers' Questions and Answers**

If you volunteer for a qualified organization, the following questions and answers may apply to you. All of the rules explained in this publication also apply. See, in particular, *Out-of-Pocket Expenses in Giving Services*.

Question	Answer
I volunteer 6 hours a week in the office of a qualified organization. The receptionist is paid \$10 an hour for the same work. Can I deduct \$60 a week for my time? The office is 30 miles from my home. Can I deduct any of my car expenses for these trips?	No, you can't deduct the value of your time or services. Yes, you can deduct the costs of gas and oil that are directly related to getting to and from the place where you volunteer. If you don't want to figure your actual costs, you can deduct 14 cents for each mile.
I volunteer as a Red Cross nurse's aide at a hospital. Can I deduct the cost of the uniforms I must wear?	Yes, you can deduct the cost of buying and cleaning your uniforms if the hospital is a qualified organization, the uniforms aren't suitable for everyday use, and you must wear them when volunteering.
I pay a babysitter to watch my children while I volunteer for a qualified organization. Can I deduct these costs?	No, you can't deduct payments for childcare expenses as a charitable contribution, even if you would be unable to volunteer without childcare. (If you have childcare expenses so you can work for pay, see Pub. 503, Child and Dependent Care Expenses.)

deduction if you are compensated or reimbursed for any part of the costs of having a student live with you. However, you may be able to claim a charitable contribution deduction for the unreimbursed portion of your expenses if you are reimbursed only for an extraordinary or one-time item, such as a hospital bill or vacation trip, you paid in advance at the request of the student's parents or the sponsoring organization.

Mutual exchange program. You can't deduct the costs of a foreign student living in your home under a mutual exchange program through which your child will live with a family in a foreign country.

Reporting expenses. For a list of what you must file with your return if you deduct expenses for a student living with you, see [Reporting expenses for student living with you](#) under *How To Report*, later.

Out-of-Pocket Expenses in Giving Services

Although you can't deduct the value of your services given to a qualified organization, you may be able to deduct some amounts you pay in giving services to a qualified organization. The amounts must be:

- Unreimbursed,
- Directly connected with the services,
- Expenses you had only because of the services you gave, and
- Not personal, living, or family expenses.

Table 2 contains questions and answers that apply to some individuals who volunteer their services.

Underprivileged youths selected by charity. You can deduct reasonable unreimbursed out-of-pocket expenses you pay to allow underprivileged youths to attend athletic events, movies, or dinners. The youths must be selected by a charitable organization whose goal is to reduce juvenile delinquency. Your own similar expenses in accompanying the youths aren't deductible.

Conventions. If a qualified organization selects you to attend a convention as its representative, you can deduct your unreimbursed expenses for travel, including reasonable amounts for meals and lodging, while away from home overnight for the convention. However, see [Travel](#), later.

You can't deduct personal expenses for sightseeing, fishing parties, theater tickets, or nightclubs. You also can't deduct travel, meals and lodging, and other expenses for your spouse or children.

You can't deduct your travel expenses in attending a church convention if you go only as a member of your church rather than as a chosen representative. You can, however, deduct unreimbursed expenses that are directly connected with giving services for your church during the convention.

Uniforms. You can deduct the cost and upkeep of uniforms that aren't suitable for everyday use and that you must wear while performing donated services for a charitable organization.

Foster parents. You may be able to deduct as a charitable contribution some of the costs of being a foster parent (foster care provider) if you have no profit motive in providing the foster care and aren't, in fact, making a profit. A qualified organization must select the individuals you take into your home for foster care.

You can deduct expenses that meet both of the following requirements.

1. They are unreimbursed out-of-pocket expenses to feed, clothe, and care for the foster child.
2. They are incurred primarily to benefit the qualified organization.

Unreimbursed expenses that you can't deduct as charitable contributions may be considered support provided by you in determining whether you can claim the foster child as a dependent. For details, see Pub. 501, Exemptions, Standard Deduction, and Filing Information.

Example. You cared for a foster child because you wanted to adopt her, not to benefit the agency that placed her in your home. Your

unreimbursed expenses aren't deductible as charitable contributions.

Church deacon. You can deduct as a charitable contribution any unreimbursed expenses you have while in a permanent diaconate program established by your church. These expenses include the cost of vestments, books, and transportation required in order to serve in the program as either a deacon candidate or an ordained deacon.

Car expenses. You can deduct as a charitable contribution any unreimbursed out-of-pocket expenses, such as the cost of gas and oil, directly related to the use of your car in giving services to a charitable organization. You can't deduct general repair and maintenance expenses, depreciation, registration fees, or the costs of tires or insurance.

If you don't want to deduct your actual expenses, you can use a standard mileage rate of 14 cents a mile to figure your contribution.

You can deduct parking fees and tolls whether you use your actual expenses or the standard mileage rate.

You must keep reliable written records of your car expenses. For more information, see [Car expenses](#) under *Records To Keep*, later.

Travel. Generally, you can claim a charitable contribution deduction for travel expenses necessarily incurred while you are away from home performing services for a charitable organization only if there is no significant element of personal pleasure, recreation, or vacation in the travel. This applies whether you pay the expenses directly or indirectly. You are paying the expenses indirectly if you make a payment to the charitable organization and the organization pays for your travel expenses.

The deduction for travel expenses won't be denied simply because you enjoy providing services to the charitable organization. Even if you enjoy the trip, you can take a charitable contribution deduction for your travel expenses if you are on duty in a genuine and substantial sense throughout the trip. However, if you have only nominal duties, or if for significant parts of the trip you don't have any duties, you can't deduct your travel expenses.

E. All Neighbor Brigade Waiver Forms included in the Volunteer Application and Client Application process:

i. Volunteer Application

VOLUNTEER APPLICATION
(submitted electronically)

First Name _____

Middle Initial _____

Last Name _____

Address 1 _____

Address 2 _____

City _____ **State** _____ **Zip** _____

Primary Phone Number _____

Cellular/Mobile Phone Number _____

Email Address _____

Emergency Contact Person _____

Relationship _____

Emergency Contact Phone Number _____

Date of Birth _____

Have you ever been convicted of a felony? _____

Please Provide an Explanation if Applicable _____

Within the last five years have you been convicted or incarcerated for a misdemeanor which was *not* a first offense for drunkenness, simple assault, speeding, a minor traffic violation, an affray, or disturbing the peace?

Please Provide an Explanation if Applicable _____

Specific Activities Offered

- Preparing and delivering meals**
- Recipient Transport**
- Pet Care Assistance**
- Light Housework**
- Other**

Chapter Selection

If Driving is Involved, Please Provide the Following: _____

- Photocopy of Driver's License**
- Proof of Insurance/Insurance Certificate**

Anti-Discrimination Statement:

It is the policy of Neighbor Brigade to ensure equal opportunities to all volunteer applicants without discrimination or harassment on the basis of race, color, religion, sex, sexual orientation, gender identity or expression, age, disability, marital status, citizenship, genetic information, or any other characteristic protected under the laws of the United States and the Commonwealth of Massachusetts.

Disclaimers

Volunteers must be at least 14 years of age. For applicants under age 18, the signature of a legal parent or guardian must be provided below. I understand that the submission of this application does not create an employment or volunteer agreement with Neighbor Brigade. As needed, Neighbor Brigade may request additional documentation to support this application, including but not limited to a criminal background check.

I understand that Neighbor Brigade is a not-for-profit organization. I understand that this is a volunteer position, and that, as a result, I will receive no remuneration or benefits in exchange for my services. I understand further that I will not be reimbursed for expenses or costs incurred in performing activities as a volunteer, unless specifically authorized in the Neighbor Brigade Volunteer Handbook or in advance by Neighbor Brigade’s management.

I further understand that Neighbor Brigade reserves the right to decline this volunteer application for any reason, other than one inconsistent with its Anti-Discrimination Statement. I further understand that my status as a volunteer with Neighbor Brigade will be at-will, and may be terminated with or without notice under Massachusetts law at any time.

I certify that all answers and statements made on this application are true and complete to the best of my knowledge. I understand that, should this application contain any false or misleading information, my application may be rejected and my role as a volunteer with Neighbor Brigade may be terminated.

Signature _____ **Date** _____
If Under 18, Parent or Guardian Signature _____ **Date** _____

PARTICIPANT AGREEMENT AND LIABILITY RELEASE

Each volunteer or other participant in Neighbor Brigade activities must complete and sign this Participant Agreement and Liability Release (the "Agreement"). Please read this Agreement carefully before signing.

I understand that I must be at least 14 years of age to be a volunteer with Neighbor Brigade. I represent that I am at least 18 years of age or over, and that if not, the endorsement set forth below is signed by my parent or guardian.

I acknowledge and agree that I am not an employee of Neighbor Brigade and am not entitled to any monetary compensation or any other form of remuneration or benefits from Neighbor Brigade. I understand I am engaging in Neighbor Brigade volunteer activities at my own risk. As between myself and Neighbor Brigade, I knowingly and freely assume all risk and full responsibility for my participation with Neighbor Brigade activities, including any damage to my personal property and/or any personal injury I may sustain during my participation.

On behalf of myself and my heirs, I hereby hold harmless Neighbor Brigade and its affiliates, partners, agents, officers, directors, employees, service providers, sponsors, volunteers, successors and assigns (collectively the "Indemnitees") from and against any and all claims, losses, actions, liabilities and costs ("Claims") arising from my participation in any Neighbor Brigade activities, including, if through the course of my participation, I act in a negligent manner or otherwise engage in any reckless or illegal act, or take any other action that violates Neighbor Brigade's policies, instructions or guidelines. To the extent permitted by law, I hereby waive any Claim I may have, known or unknown, against the Indemnitees resulting from my participation with Neighbor Brigade, whether or not arising from the negligence of Indemnitees.

If I will be driving any vehicle in connection with Neighbor Brigade activities, I agree to: (i) maintain, and upon request provide evidence of, my current status as a licensed driver in good standing; (ii) adhere to all instructions and directions provided to me by Neighbor Brigade and the Neighbor Brigade Volunteer Handbook; (iii) promptly notify Neighbor Brigade of any physical conditions, vehicle defects, or road conditions that might affect my safety or the safety of others; (iv) if involved in an accident, complete an accident report and cooperate with the authorities and Neighbor Brigade; and (v) if my vehicle is used for Neighbor Brigade activities, maintain current and adequate insurance coverage. I understand that the limits and coverage provided by my personal automobile insurance are applicable to any accidents or incidents that involve my vehicle, including those that occur while I am serving as a volunteer driver.

I agree to discontinue my participation in Neighbor Brigade activities if I am requested to do so. I further understand that Neighbor Brigade reserves the right to decline this volunteer application for any reason, other than one inconsistent with its Anti-Discrimination Statement. I further understand that my status as a volunteer with Neighbor Brigade will be at-will, and may be terminated with or without notice under Massachusetts law at any time.

Signature _____ **Date** _____
If Under 18, Parent or Guardian Signature _____ **Date** _____

CORI CONSENT FORM

I hereby authorize Neighbor Brigade to conduct a background investigation, including a CORI background check, if required by Neighbor Brigade policy, as may be deemed necessary to determine my eligibility for participation as a volunteer.

I have enclosed a signed copy of the CORI Acknowledgement Form with this Consent.

Signature _____ **Date** _____
If Under 18, Parent or Guardian Signature _____ **Date** _____

VOLUNTEER HANDBOOK CERTIFICATION

I _____, have received and read the Neighbor Brigade Volunteer Handbook which outlines the goals, policies, procedures, and expectations of Neighbor Brigade, as well as my responsibilities as a volunteer.

I have familiarized myself with the contents of the handbook. By my signature below, I acknowledge, understand, accept, and agree to comply with the information and procedures contained in the Volunteer Handbook. I understand the Volunteer Handbook is not intended to cover every situation which may arise during my time serving as a volunteer, but is simply a general guide to the goals, policies, practices, benefits and expectations of Neighbor Brigade.

I understand that the Neighbor Brigade Volunteer Handbook is not a contract in of itself and should not be deemed as such. I further understand that the Volunteer Handbook may be updated or amended at the sole discretion of Neighbor Brigade at any time hereafter, and that I will be bound by its terms if Neighbor Brigade provides adequate notice.

Signature _____ **Date** _____
If Under 18, Parent or Guardian Signature _____ **Date** _____

TRADEMARK AND COPYRIGHT USAGE

I acknowledge that I have a limited right to use the trade name and service mark “Neighbor Brigade,” slogan “Help is Next Door,” Neighbor Brigade logo, and any other Neighbor Brigade marks (the “Licensed Marks”) and other materials provided by Neighbor Brigade in connection with my services as a volunteer. I agree to use such Licensed Marks and materials only in connection with my participation as a volunteer and in accordance with the Neighbor Brigade Volunteer Handbook, as well as any other instructions or guidelines that may be provided to me by Neighbor Brigade, including via its website, from time to time. I hereby assign and convey to Neighbor Brigade all right, title and interest in, and to, any and all materials that I may create, or contribute to, that relate to Neighbor Brigade, including photographic images or video or audio recordings made about Neighbor Brigade and any royalties, proceeds or other benefits derived from such photographs or recordings.

I agree to perform all volunteer activities, including those that involve use of the Licensed Marks, in accordance with the highest standards of quality and care. In the course of participating in Neighbor Brigade activities, I will not act in any manner that would be detrimental to Neighbor Brigade and I will avoid any actions that might impair the reputation of Neighbor Brigade. At all times, I will comply with all applicable laws, regulations and legal standards and any policies, instructions or guidelines provided by Neighbor Brigade.

I acknowledge that I have been provided with Neighbor Brigade’s Service Mark Usage and Guidelines explaining the proper usage of Neighbor Brigade’s trade names and service marks.

Signature _____ **Date** _____
If Under 18, Parent or Guardian Signature _____ **Date** _____

CONFIDENTIALITY AGREEMENT

I understand that I may become privy to confidential information about Neighbor Brigade or the individuals it serves. I agree to maintain the confidentiality of any information I receive, including but not limited to information marked “confidential,” as well as any information about Neighbor Brigade’s internal procedures, business operations, existing or prospective service recipients, proprietary business information, personnel information and the like that is not otherwise publicly disclosed by Neighbor Brigade. I will not use or disclose the confidential information, except as required to perform my volunteer activities, and will not discuss the personal circumstances of those receiving services from Neighbor Brigade outside the organization.

I further understand that Neighbor Brigade does not provide healthcare services, but may from time to time receive information regarding service recipients that is similar to “protected health information” under the Health Insurance Portability and Accountability Act of 1996 (“HIPPA”). With respect to service recipients, I agree to keep information regarding personal emergencies, medical conditions, or other individual details confidential, except to the extent disclosure is necessary to perform my duties as a volunteer.

Signature _____ **Date** _____
If Under 18, Parent or Guardian Signature _____ **Date** _____

Error! Unknown document property name.

ii. Recipient Application

SERVICE RECIPIENT APPLICATION

Basic Information

First Name _____

Middle Initial _____

Last Name _____

Address 1 _____

Address 2 _____

City _____ State _____ Zip _____

Primary Phone Number _____

Cellular/Mobile Phone Number _____

Email Address _____

Emergency Contact Person _____

Relationship _____

Emergency Contact Phone Number _____

Date of Birth _____

Please choose from the following options to describe your temporary emergency

Cancer
Auto Accident
Death in family
Injury
Illness
Miscellaneous

Please provide any details about your temporary emergency which will help our volunteers better serve you.

*Please note: Neighbor Brigade does not consider situations that are solely financial to be temporary emergencies.

How long do you expect your temporary situation to last?

How Can We Help

Friendly visitor

Date/Time

Recipient Transportation

Please Describe Your Transportation Needs

Date/Time/Pickup Location/Drop off Location/Reason

Will the transportation require you to be lifted or moved by another person?

If "Yes," will another person be available to assist you?

Will any other person, service animal, or mobility equipment be traveling with you during this scheduled transportation?

Meals

Please indicate your meal schedule needs:

Indicate likes/dislikes _____

Please list any and all food allergies _____

Pet Care

Identify Type of Pet, size of animal _____

Light Housework

If work requires volunteers to enter your residence, please indicate whether you have insurance (homeowners/renters/landlord) _____

Other (please explain)

Services Not Performed

Neighbor Brigade will not perform the following services:

- Activities involving care related to the health of an individual, including preventative, diagnostic, therapeutic, or rehabilitative services, as well dispensing any drugs or devices in accordance with a prescription;
- Lifting or moving Service Recipients, including into vehicles for transport;
- Assisting Service Recipients with their daily personal care or hygiene;
- Acting as a liaison between the Service Recipient and health care providers;
- Any services where performance or conditions may endanger the safety of a volunteer or Service Recipient;
- Services or benefits for persons other than the Service Recipient listed in this application.

Anti-Discrimination Statement

It is the policy of Neighbor Brigade to provide services to all Applicants without discrimination or harassment on the basis of race, color, religion, sex, sexual orientation, gender identity or expression, age, disability, marital status, citizenship, genetic information, or any other characteristic protected under the laws of the United States and the Commonwealth of Massachusetts.

Disclaimers

I understand that Neighbor Brigade is a Massachusetts not-for-profit corporation whose purposes are to provide free temporary support to individuals in the community that are experiencing a non-financial temporary emergency. Neighbor Brigade will not under any circumstances charge me for services performed.

To the extent Neighbor Brigade or its volunteers receive information that is personal regarding a Service Recipient’s temporary emergency, family status, or medical history, Neighbor Brigade will take reasonable and appropriate steps to keep that information private and confidential. Neighbor Brigade will not share personal information concerning Service Recipients to any third parties for commercial purposes.

The submission of this Application is not intended to create a relationship between the Service Recipient and Neighbor Brigade. Upon review of this Application, Neighbor Brigade reserves the right to decline services for any potential Service Recipient or third party at any time consistent with its Anti-Discrimination Statement. After reviewing your Application, a representative from Neighbor Brigade will contact you to discuss and review your needs further.

Waivers

If this Application is accepted, I hereby agree to assume any and all risks incidental to the free services provided by Neighbor Brigade. In addition, I hereby waive, release, absolve, indemnify, and agree to hold harmless Neighbor Brigade, its officers, directors, members, volunteers, and their assigns, from any and all liability, claims, damages, or other actions arising out of any injury to my person or property, whether resulting from negligence or any other cause, in the course of my receipt of services from Neighbor Brigade.

I certify that all answers and statements made on this Application are true and complete to the best of my knowledge. I, on my own behalf am executing this release of all claims and waiver of liability freely and voluntarily without any reservation. I acknowledge I have read this entire agreement and understand the language herein.

Signature

2779867_1/14802-2

Date



Marketing/Communications Waiver Form

I hereby relinquish to Neighbor Brigade all rights to the use of my images (in photo or video) and my story as it relates to my experience with Neighbor Brigade, and/or those of my minor children (if applicable), for use in marketing and public relations. I also give Neighbor Brigade permission to name my town as part of my story, for these same purposes. My images and story, including direct and indirect responses and quotes, will be used by Neighbor Brigade.

Waiver, Indemnity and Release

I acknowledge that Neighbor Brigade will own such images and story of me and/or those of my minor children (if applicable) and further grant Neighbor Brigade permission to copyright, display, publish, distribute, use, modify, print and reprint such images and story in any manner whatsoever related to Neighbor Brigade business, including but not limited to: newspapers, radio and television stories, news websites, videos, brochures, press releases, publications, advertisements, web site images, or other electronic displays and transmissions thereof. I further waive any right to inspect or approve the use of the images and story by Neighbor Brigade prior to its use. I forever release and hold Neighbor Brigade harmless from any and all liability arising out of the use of the images and story in any manner or media whatsoever, and waive any and all claims and causes of action relating to use of the Images, including without limitation, claims for invasion of privacy rights or publicity.

I acknowledge and represent that I am over the age of 18, have read this entire document, that I understand its terms and provisions, and that I have signed it knowingly and voluntarily on behalf of myself and/or my minor children (if applicable).

Print Name

Signature

Date

Address

City/State/Zip code

Telephone

Email

***If applicable:**

Name of Minor Child: _____

Name of Minor Child: _____

Name of Minor Child: _____

