



## Volunteer Form

Name:

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Phone:

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Okay to text?: Y/N

E-mail:

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Address:

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How did you hear about us?

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Please check all that interest you		
LOLF	CWC	STAR
<input type="checkbox"/> Speaker	<input type="checkbox"/> Hotline Operator	<input type="checkbox"/> Event Assistant
<input type="checkbox"/> Bottle Drive prep		<input type="checkbox"/> Clean/Organize
<input type="checkbox"/> Deliver/pick up Driver		<input type="checkbox"/> Donation Drop off
<input type="checkbox"/> Church volunteer		<input type="checkbox"/> Mommy's Helpers
<input type="checkbox"/> Lite Housekeeping		<input type="checkbox"/> Diaper Packing
		<input type="checkbox"/> Baby Bundles
		<input type="checkbox"/> "Teach" a Skill To Moms

Availability:

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## STATEMENT OF FAITH

I, \_\_\_\_\_, as a staff member/volunteer for the Legacy of Life Foundation, Inc. dba Community Women's Centers of America, promise to uphold the teachings of the Magisterium of the Catholic Church in my ministry to women in crisis pregnancies. Through this ministry, I will always speak and act in accordance with the statements below in order to further the pro-life mission of the Legacy of Life Foundation dba Community Women's Centers of America.

At the Legacy of Life Foundation, Inc. dba Community Women's Centers of America we do not support or refer clients for any form of abortion, whether medical, surgical or partial-birth abortion, regardless of the client's personal and/or health circumstances. We believe every abortion is evil and "gravely contrary to moral law"<sup>1</sup>, and that this teaching cannot be changed.

At the Legacy of Life Foundation, Inc. dba Community Women's Centers of America we do not support or recommend any form of artificial contraception, including the morning after pill. We believe direct sterilization or contraception is intrinsically evil because it makes procreation impossible.<sup>2</sup> Instead, we support Natural Family Planning, which reflects the dignity of the human person within the context of marriage and family life, promotes openness to life and recognizes the value of the child.<sup>3</sup>

At the Legacy of Life Foundation, Inc. dba Community Women's Centers of America we do not support or recommend In-Vitro Fertilization or similar forms of reproductive technology. We believe that by separating the sexual and procreative acts, these forms of technology are contrary to the dignity of the human person and the sanctity of marriage.<sup>4</sup>

My signature below declares my statement of faith and my support of the views of the Legacy of Life Foundation, Inc. dba Community Women's Centers of America as professed by the Catholic Church.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

This CERTIFICATE is executed on the date indicated below (the "Effective Date") by

<sup>1</sup> Catechism of the Catholic Church, 2271

<sup>2</sup> CCC, 2370

<sup>3</sup> CCC, 2399

<sup>4</sup> CCC, 2377



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## Non-Disclosure Certificate

This certificate is executed on the date indicated below (the "Effective Date") by

\_\_\_\_\_, whose principal mailing address is

\_\_\_\_\_ (the "Signatory")

WHEREAS the Signatory and the Legacy of Life Foundation, Inc. (the "Foundation") (together with the Signatory, the "Parties") anticipate that they will be participating in planning, discussions, and/or research wherein the Foundation might share information with the Signatory that the Foundation considers to be proprietary and confidential ("Confidential Information"); and

WHEREAS the Parties agree that Confidential Information of the Foundation might include, but not be limited to information concerning the Foundation's (1) business and/or fundraising plans, methods, and practices; (2) personnel, donors, customers, and suppliers; (3) inventions, processes, methods, products, patent applications, and other proprietary rights; and/or (4) specifications, drawings, sketches, models, samples, tools, computer programs, technical information, or other related information;

NOW, THEREFORE, the Signatory certifies as follows:

1. The Signatory shall refrain from disclosing Confidential Information to any third party without prior written approval from the Foundation and shall protect such Confidential Information from inadvertent disclosure to a third party using the same care and diligence that the Signatory uses to protect its own proprietary and confidential information, but in no case less than reasonable care. The Signatory shall ensure that each of its employees, officers, directors, or agents who has access to Confidential/Information disclosed under this Agreement is informed of its proprietary and confidential nature and shall be required to execute a Non-Disclosure Certificate.

2. The Signatory shall honor any request from the Foundation to promptly return or destroy all copies of Confidential Information disclosed and all notes related to such Confidential Information. The Signatory agrees that the Foundation will suffer irreparable injury if its Confidential Information is made public, released to a third party, or otherwise disclosed in breach of this Certificate and that the Foundation shall be entitled to obtain injunctive relief against a threatened breach or continuation of any such breach and, in the event of such breach, may be entitled to an award of actual and exemplary damages from any court of competent jurisdiction.

3. The Signatory acknowledges that nothing in this Certificate will prohibit the Signatory from developing or having developed for it products, concepts, systems or techniques that are similar to or compete with the products, concepts, systems or techniques contemplated by or embodied in the Confidential Information provided that the Signatory agrees to not violate any of its obligations under this Certificate in connection with such development.



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4. Notwithstanding the above, the Signatory acknowledges that information shall not be deemed Confidential Information and the Signatory shall have no obligation to hold in confidence such information, where such information:

a) Is already known to the Signatory, having been disclosed to the Signatory by a third party without such third party having an obligation of confidentiality to the Foundation; or

b) Is or becomes publicly known through no wrongful act of the Signatory its employees, officers, directors, or agents; or

c) Is independently developed by the Signatory without reference to any Confidential Information

d) Is approved for release (and only to the extent so approved) by the Foundation; or

e) Is disclosed pursuant to the lawful requirement of a court or governmental agency or where required by operation of law.

5. The Signatory acknowledges that nothing in this Certificate shall be construed to constitute an agency, partnership, joint venture, or other similar relationship between the Parties.

EXECUTED THIS \_\_\_\_\_ DAY OF \_\_\_\_\_, 20\_\_

X \_\_\_\_\_  
(signature)

ACKNOWLEDGED BY LEGACY OF LIFE FOUNDATION, INC.

X \_\_\_\_\_  
BY: MARIE JOSEPH  
EXECUTIVE DIRECTOR

DATE: \_\_\_\_\_



# Volunteer Protocol

*"You are the light of the World...."*

## **Confidentiality**

All volunteers of the *Legacy of Life Foundation* may be exposed to information which is confidential and/or privileged and proprietary in nature. It is the policy of the *Legacy of Life Foundation* that such information must be kept confidential both during and after volunteer service. Any information concerning clients, former clients, our staff, or volunteers, is considered confidential. "Confidential" means that you are free to talk about *Legacy of Life Foundation* and its program offerings in general, and you are free to talk about your involvement with program delivery but you are not permitted to disclose clients' names or talk about them in ways that will make their identity known. You are not permitted to use any information about client services or center operations gained during your volunteer term for research or other public purposes.

## **Personal Information**

While you are working with clients, it is expected that you will have warm and professional interactions with them. We hope that you will have a great time helping them to grow and develop. At the same time, it is very important that you avoid disclosing any personal information about yourself or your life, since all of the programs are centered on helping the clients to explore and improve their own lives. Examples of personal information that should not be shared with clients include: personal contact information, personal and/or identifying information about your family matters and family members, personal medical, financial or psychological history, personal feelings or views on controversial political or religious topics, and any other information that might make it possible for clients to make intentional or accidental contact with you beyond your service shift and your capacity as a volunteer with the *Legacy of Life Foundation*. You are also asked to refrain from sharing any personal information about other volunteers or staff members.

## **Spirituality**

Spirituality is an important part of the work we do at the Legacy of Life Foundation. However, we do serve clients from diverse religious, cultural and social backgrounds. Not all clients have the same degree of comfort with explicit discussions about faith and spirituality, so we ask that all volunteers communicate in ways that will make every client feel welcomed and comfortable. If you are not sure about what kinds of spiritual subject matter is suitable, please consult the Director of Client Services for further information.

## **No Judgment**

We aim to meet our clients where they are. Many of our clients might have home and family environments that are very different from ours. Our clients might share details about their lives that we might find unfamiliar or shocking. It is important that we maintain our composure and also refrain from commenting in ways that might embarrass or make our clients feel uncomfortable about various aspects of their lives including: housing conditions, relationship history, parenting styles, education level, spiritual maturity. If you have any concerns about a



specific client's situation, please feel free to notify a staff member or the Director of Client Services privately.

#### **Private Works of Charity**

As a volunteer with the *Legacy of Life Foundation*, you are working alongside staff members and donors to support the mission, "to answer the call of Christ to protect the dignity of the unborn person by speaking in defense of his or her life. The center provides women with healthy solutions to the circumstances surrounding her pregnancy by providing emotional and material support as an alternative to the violation of her body by abortion. The center educates and strongly encourages women to embrace the most healthy and holistic lifestyle by promoting the virtue of chastity and the beauty and importance of the family".

While you may feel moved by the immediate and pressing needs of a specific client, it is very important that you remember that you are part of a team. You should avoid making any direct gifts of cash, supplies or other resources to our clients. Please do not make arrangements with clients to provide childcare, transportation or other services. Any arrangements of that nature must be coordinated through the Director of Client Services. If you are worried about the needs of a specific client, please bring those needs to the attention of a staff member or the Director of Client Services.

#### **Service Day Guidelines**

Your dedication and participation is vital to the success of our programs. When you are scheduled to assist at the center or at a specific event, we ask that you plan to arrive about 15 minutes before your scheduled start time. This will give you enough time to get set up and organized before your service shift is to begin. At the end of your scheduled time, we also ask that you make yourself available for an additional 15 minutes so that you can assist with wrapping up the event. Building in the extra few minutes at the beginning and end of your volunteer service shift will enable the programs to run very smoothly for all of the volunteers and staff members.

\*Please sign and date on the bottom line after you have read the entire document.

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Signature

Date