

## **ACKNOWLEDGMENT OF RECEIPT OF THE CFC VOLUNTEER HANDBOOK**

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Name of Volunteer

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Position

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Worksite

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Date of Hire

I acknowledge that I have received the Christian Family Care Volunteer Handbook which outlines the current policies and responsibilities of Volunteers and the Agency. By signing this form, I acknowledge that I have had the opportunity to review this Handbook. I further acknowledge that I may ask any questions I may have concerning its contents and will comply with all policies and procedures herein to the best of my ability.

I understand that the information in the CFC Volunteer Handbook is not a contract and is subject to change at any time and without any notice as situations warrant and changes in the policies may supersede, modify, or eliminate policies in this handbook.

I understand that nothing in the organization's statement of personnel policies is intended to be a promise binding on the organization or to be read as a contract that limits the organization's right to terminate my volunteer opportunity at will without notice or cause, or to change its policies or benefits. I acknowledge that either I or CFC may end the volunteer relationship at any time for any reason and without prior or advance notice.

### **ACKNOWLEDGMENT:**

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Volunteer Signature

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Date

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CFC Representative Signature

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Date

Form #9069