

Volunteer Application



Colorado River Regional Crisis Shelter
1301 Joshua Ave., Suite C
Parker, AZ 85344

DECLARATION OF CONFIDENTIALITY

I, _____, do hereby declare that as a Colorado River Regional Crisis Shelter Volunteer, I will strictly observe the principles of confidentiality. Therefore, I promise:

1. _____ I will not reveal any information which might lead to the identification of any
Initials Colorado River Regional Crisis Shelter client and or resident.
2. _____ I will not give any information to anyone that might be harmful to the Colorado
Initials River Regional Crisis Shelter, its members, or its policies.
3. _____ When my relationship with the Colorado River Regional Crisis Shelter is ended,
Initials I will keep all information related to any client and or resident of the Colorado River Regional Crisis Shelter confidential.

I understand that if I break this Declaration of Confidentiality in any way, I may be asked by the Colorado River Regional Crisis Shelter to resign immediately.

Signature of Volunteer

Date

Signature of Volunteer Coordinator

Date