

**RETURNING VOLUNTEER RELEASE – POST COVID PANDEMIC**

The Returning Volunteer Release must be completed prior to duties being assigned. Once completed, the form should be kept on file with the Department of Volunteer Services, Human Resources or other designated department in charge of volunteer services.

In returning to my role as a volunteer at Kaiser Permanente Los Angeles Medical Center, I understand and agree that:

1. My services to Kaiser Permanente Los Angeles Medical Center are entirely voluntary;
2. I am entering a facility with full knowledge and understanding that Kaiser Permanente Los Angeles Medical Center is treating and receiving COVID Patients;
3. I understand that I am expected to wear appropriate level of mask while on Kaiser Property;
4. I understand and agree that I will wear my badge, and mask at all times while on the hospital campus;
5. I understand and agree to follow all required infection control practices (i.e. washing my hands, using hand sanitizer, not coming in if sick);
6. Should I choose not to follow all required safety/infection control precautions, KP may discontinue my service as a volunteer immediately;
7. Should at any time I feel unable to complete my volunteer duties I may discontinue my service as a volunteer with notice.

I have read, understand and agree with the foregoing.

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**KP Volunteer Signature**

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**Date**