



# Volunteer Agreement

As a condition to becoming a recognized and authorized volunteer, I agree to the following:

1. All the materials provided, either in my training or subsequently, are copyrighted and are not to be used by any group other than *New Hope Grief Support Community* or an affiliated entity.  
Therefore, I will not personally, or cause said material be, copied, altered, changed, modified, formatted for visual or computer display, specifically but not limited to any of the following:
  - Collateral Materials
  - Handouts
  - Resource Materials
    - A Kids Journey of Grief
    - A Journey of Grief Handbook
    - Teen Grief Handbook
2. I will not recreate in another setting independent of *New Hope Grief Support Community*, alter, change, or modify the concepts and theories model of grief support programs and training provided by *New Hope Grief Support Community*.
3. I also understand that all rights are reserved and protected by copyright law. I agree that I may not reproduce the programs or materials in another from without the express written consent of *New Hope Grief Support Community* network.

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Volunteer Signature

Date



NEW HOPE Programs, Training Materials are copyright property of:  
New Hope Grief Support Community, 3443 San Anseline Ave., Long Beach, CA 90808  
(562) 429-0075 info@newhopegrief.org www.newhopegrief.org

## Confidentiality Statement

Employees, volunteers, and board members shall not (except in proper course of legal duty) during or after any period of employment, volunteer time or any involvement with a New Hope Grief Support Community program or affiliated entity event (paid or unpaid) divulge to any person confidential information concerning New Hope Grief Support Community or affiliated entity, its clients, partners or service providers, employees, or volunteers. All who seek counsel or participate in grief groups, have the right to privacy and confidentiality. I shall hold as absolutely confidential all information that I may obtain directly or indirectly concerning any entities listed above, and will not seek to obtain confidential information from them or about them.

I have read and understood the Confidentiality Statement and agree to abide by it.

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Signature

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Printed Name

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Date



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