



## AGREEMENT TO ACCEPT DUTIES OF A VOLUNTEER

I, \_\_\_\_\_, acknowledge and accept the expectations and duties set forth as a volunteer for the Traverse Bay Children's Advocacy Center. I attest that I am sufficiently familiar with this organization to begin functioning as a volunteer with my assigned roles and tasks. As a volunteer, I will maintain confidentiality regarding the organization's business, decisions, personnel, clients, and finances. If, for any reason, I find myself unable to serve in the capacity outlined above, I agree to communicate promptly to the Executive Director to remedy this situation.

Printed Name \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_