



## REFUGEE CHILDREN CENTER

15435 RAYEN STREET  
NORTH HILLS, CA 91343  
TEL: (747) 529 – 4783

[WWW.REFUGEECHILDRENCENTER.ORG](http://WWW.REFUGEECHILDRENCENTER.ORG)

**Operations and Volunteer Coordinator:** Andrea Murillo

**Email:** [amurillo@refugeechildrencenter.org](mailto:amurillo@refugeechildrencenter.org)

**Phone Number:** (747) 529-4783, ext. 2

**Website:** <https://www.refugeechildrencenter.org>

**Mailing address:** Refugee Children Center, 15435 Rayen Street, North Hills,  
CA 91343

**Vision:** Our Vision is to be a place that offers hope to refugee children and their families in the United State

**Mission:** Our Mission is to provide a healing embrace and a dignified welcome to refugee children and their families who have made the perilous journey to the U.S.-Mexico border.

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## Volunteer Registration Form

### Personal Information

- **Full Name:** \_\_\_\_\_
- **Phone Number:** \_\_\_\_\_
- **Email Address:** \_\_\_\_\_
- **Date of Birth:** \_\_\_\_\_
- **Address:** \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

### Emergency Contact

- **Name:** \_\_\_\_\_
- **Phone Number:** \_\_\_\_\_
- **Relationship:** \_\_\_\_\_



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### Volunteer Interests

(Please check all that apply)

- Set-up/Tear-down for events (Support for newly immigrated children)
  - Early Childhood Education Preschool drop-in
  - Art & Crafts facilitator
  - Sports Clinics (Weekend activities for youth)
  - Skill building Facilitator (Sewing, cooking, knitting, etc)
  - Social/emotional/wellness Facilitator (Yoga, sound bath, zumba)
  - Intake preparer/USCIS Form Preparer (attorney supervision will be provided)
  - English and Spanish language interpreter during immigration consultations
  - English and Spanish language Document Translation
  - Administrative Support
  - Special Events & Fundraisers
  - Other: \_\_\_\_\_
- 

### Volunteer Agreement

#### Code of Conduct

1. Represent the Refugee Children Center positively at all times.
2. Follow all safety protocols and instructions from staff.
3. Arrive on time for scheduled shifts and notify the coordinator if unable to attend.
4. Maintain respectful and professional behavior.
5. Dress appropriately (no offensive language, closed-toed shoes required).
6. Abstain from using drugs, alcohol, or tobacco during volunteer activities.



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### **Transportation and Liability Form \_\_\_\_\_ (initials)**

It is understood by the volunteer that they may be asked to operate their vehicle on behalf of the San Fernando Valley Refugee Children Center, Inc., hereinafter referred by SFVRCC. This use of the vehicle on behalf of SFVRCC may involve driving a volunteer's vehicle to deliver food to or accompany participants to their appointments. When a volunteer is on agency business, the employee understands that SFVRCC neither provides primary insurance coverage to the volunteer liability, nor for damage to the employee's vehicle. This means that SFVRCC's policy will not pay claims made against the volunteer for bodily injury, or property damage caused by the volunteer in an auto accident or pay for repairs for damage to the volunteer's vehicle. As a condition of volunteer opportunities the insurance company requires that all volunteers show proof of valid liability insurance, or a copy of the face sheet of the volunteer's personal auto policy. While it's not a requirement that the volunteer carry comprehensive and collision insurance, it is highly recommended.

I, \_\_\_\_\_ have read and understood the above statement. I also hereby waive and release, promise to hold harmless, and carelessly discharge San Fernando Valley Refugee Children Center, Inc. and all of its members, faculty, staff, of, and from any and all claims, demands, causes of action or injury, lawsuits, damages and liabilities, of all natures whether it is known, or unknown, in law, or equity, that I may have, or ever have, while participating with the San Fernando Valley Refugee Children Center, Inc.

### **Confidentiality Agreement \_\_\_\_\_ (initials)**

Volunteers must maintain confidentiality regarding all client information and agree not to disclose personal details of families served by the Refugee Children Center.



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**Release of Liability \_\_\_\_\_ (initials)**

I understand that participation as a volunteer is at my own risk. I release the Refugee Children Center from any liability related to injury, loss, or damage incurred during volunteer activities.

**Media Consent \_\_\_\_\_ (initials)**

- I grant permission for my photos/videos to be used for RCC promotions.
- I do **not** grant permission for my photos/videos to be used.

**Signature**

I have read and agree to the terms outlined above.

**Volunteer Name:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Volunteer Time Tracking**

Fecha	Hora de entrada	Hora de salida	Total de horas	Descripción de tarea	Firma del supervisor
Date	Time in	Time out	Total hours	Description of assignment	Supervisor's signature

