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

Operations and Volunteer Coordinator: Frida Ramirez Aldapa

Email: <u>fraldapa@refugeechildrencenter.org</u> **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.

Volunteer Registration Form

Personal Information

• Full Name:		
• Phone Number: _		
• Email Address: _		
Date of Birth:		
• Address:		
City:	State:	Zip Code:
ergency 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.

Confidentiality Agreement

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

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
 □ 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

Date	Time In	Time Out	Total Hours	Task Description	Supervisor's Signature