

**Family Services of Westchester, Inc.**  
**One Gateway Plaza**  
**Port Chester, New York 10573**  
**(914) 937-2320**

**Student/Intern/Volunteer Personal Information Profile**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

**FOR ALL:**

In Case of Emergency Notify: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Relationship: \_\_\_\_\_ Telephone: \_\_\_\_\_

Personal Physician: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Have you any physical limitations that may affect performance at FSW?

\_\_\_\_\_

Medications or Allergies FSW should be informed of: \_\_\_\_\_

**Volunteer Information:**

Skills/Abilities: \_\_\_\_\_

Program volunteered for: \_\_\_\_\_

Days/Hours of Availability: \_\_\_\_\_

How were you referred to Family Service of Westchester? \_\_\_\_\_



One Gateway Plaza  
Port Chester, NY 10573

phone: 914 937 2320  
fax: 914 937 4902  
email: fsw@fsw.org  
web: www.fsw.org

## Model Release Form For Photographs and Video

I hereby give to Family Services of Westchester

- A) the unrestricted right and permission to copyright and use, re-use, publish and republish photographs and video of me or in which I may be included intact or in part, with no restriction, in any and all media now or hereafter known for promotion, advertising or any other purpose whatsoever. I understand this is not for commercial purposes, but to promote and advertise Family Services of Westchester and its programs, and I waive any rights of compensation.
- B) I also permit the use of any printed material in connection therewith.
- C) I hereby relinquish any right that I may have to examine or approve the completed product or products, or the advertising copy or printed matter that may be used in conjunction therewith or the use to which it may be applied.
- D) I hereby release, discharge and agree to save harmless Family Services of Westchester, its legal representatives and all persons functioning under its authority from any liability by virtue of any blurring, distortion, alteration, optical illusion, or use in composite form whether intentional or otherwise, that may occur or be produced in the taking of said picture or video or in any subsequent process thereof, as well as any publication thereof, including without limitation any claims for libel or invasion of privacy.
- E) I hereby affirm that I am over the age of majority and have the right to contract in my own name or for my minor child. I have read the above authorization, release and agreement, prior to its execution; I fully understand the contents thereof. This agreement shall be binding upon me and my heirs, legal representatives and assigns.

NAME \_\_\_\_\_

SIGNED: \_\_\_\_\_ DATED: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

STATE/ZIP: \_\_\_\_\_ PHONE: \_\_\_\_\_

WITNESS: \_\_\_\_\_ DATED: \_\_\_\_\_



*Making a difference right at home.*





One Gateway Plaza  
Port Chester, NY 10573

phone: 914.937.2320  
fax: 914.937.4902  
email: fsw@fsw.org  
web: www.fsw.org

## FAMILY SERVICES OF WESTCHESTER

### CONFIDENTIALITY AGREEMENT

All consumer information and corresponding records are the property of Family Services of Westchester (FSW) and are internally maintained for the benefit of the client, the staff and the agency program. All personnel records, including personnel files, income and payroll information and pertinent medical data are kept for the benefit of agency administration.

It is the policy of FSW that information concerning any consumers served and internal business and personnel affairs of the organization, particularly confidential information and trade secrets, represent proprietary assets that each employee has a continuing obligation to protect even after volunteering ends.

I understand my obligations as a FSW volunteer and agree to abide by the above confidential information policy.

\_\_\_\_\_

Print Name

\_\_\_\_\_

Signature

\_\_\_\_\_

Date

*Making a difference right at home.*

ACCREDITED

