PEDIATRIC PLAY ATRIUM VOLUNTEER CONTRACT

We ask each participant to agree to the following statements and sign this form:

1. I will be dependable and come at my scheduled time.

2. I will complete this form, as well as the online training, and submit both this form and my online training completion email to the Pediatric Play Atrium at my scheduled time to volunteer.

3. I will obey the UNC Health Care dress code as outlined below. **ANYONE DRESSED INAPPROPRIATELY WILL NOT BE ALLOWED TO PARTICIPATE.**
   - Appropriate good taste and good grooming.
   - UNC Health Care believes personal neatness and appropriate attire provide an atmosphere of confidence and professionalism.
   - Clothing should be clean, pressed, and in good condition.
   - SHORTS, TANK TOPS, HATS and MIDRIFFS are considered inappropriate.
   - Jeans are allowed as long as they do not have holes/rips in them (including jeans that were designed with rips). No leggings, exercise clothes, or active wear may be worn.
   - No sandals, flip flops or “open toed” shoes may be worn. Soft-soled shoes such as sneakers or tennis shoes are suggested.
   - No body fragrances- cologne, aftershave, perfume, scented lotions, etc.
   - Body tattoos and excessive piercings should not be visible while volunteering.

4. I will be pleasant to everyone, have a friendly smile for everyone I encounter, and I will have a positive attitude while I am participating in any activity at UNC Medical Center.

5. I will adhere to the confidentiality and privacy rights of the patients and families at all times.

*Groups volunteering in the Play Atrium MUST bring a structured arts & crafts activity (not coloring), otherwise, they will not be able to stay for the session.*

I certify that I have read and agree to comply by the rules set by the Department of Volunteer Services and UNC Health Care.

________________________________________________________________________
Signature
Date

________________________________________________________________________
Print Name

________________________________________________________________________
Group Represented

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Department of Volunteer Services
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