



Pregnancy Decision
Health Centers

Life Support Volunteer Application

Please complete this application only after viewing our Volunteer Orientation at www.pdhc.org/do/volunteers.php

Have you viewed the Volunteer Orientation? Yes No

Name: _____ Date: _____

Address: _____ City: _____ Zip: _____

Phone: (Home) _____ (Cell) _____ (Work) _____

Email address: _____

Date of birth (without year): _____

Name of local church: _____

Languages spoken (other than English): _____

Please check the opportunities you are most interested in:

Administrative (Administration Office only)

- Mailings
- Data Entry
- Clerical

Material Aid (Primarily at Administration Office)

- Organize donated material aid items
- Knit or crochet baby booties and/or blankets
- Wash and iron donated items

Development and Special Events (Administration Office/Special Events sites only)

Special Events Committee:

- Walk and Run for Life
- Golf for Life
- Fund Raising Banquets
- Assist at Special Events
- Baby Bottle Campaign
- Church Liaison

Maintenance (Various locations)

- Gardening and yard work
- Cleaning
- Painting
- General repair
- Deliveries

Prayer Team (From home-must have access to email)

- Pray for clients vulnerable to abortion

Please list other skills that you wish to utilize as a PDHC volunteer:

When are you available to volunteer (e.g., day of the week, daytime/evening, etc.)? _____

Would you like to come in on a regular schedule, or be contacted as needed?

- Regular schedule As needed

Notes (office use only):

Office Use Only:

- Enter in database
- Create file
- Put in binder
- Give to Volunteer Committee

The Nicene Creed has been widely accepted in modern times as a proposed basis of Christian unity. This is an expression of the Christian faith to which most Christians can agree, although they may interpret it differently according to their church tradition.

The Nicene Creed

I believe in one God, the Father Almighty, Maker of heaven and earth, and of all things visible and invisible. And in one Lord, Jesus Christ, the Only-begotten Son of God. Born of the Father before all ages. God of God, Light of Light, true God of true God. Begotten not made, of one being with the Father, by Whom all things were made. Who for us men, and for our salvation, came down from heaven. And was made flesh by the Holy Spirit of the Virgin Mary: and was made man. He was also crucified for us, suffered under Pontius Pilate and was buried. On the third day He rose again according to the Scriptures. And ascended into heaven, He sits at the right hand of the Father. And He shall come again in glory to judge the living and the dead; and of His kingdom there shall be no end. And I believe in the Holy Spirit, the Lord and Giver of Life, Who proceeds from the Father and the Son. Who together with the Father and the Son is no less adored and glorified: Who spoke through the Prophets. And I believe in one, holy, catholic, and apostolic church. I confess one Baptism for the forgiveness of sins. And I look for the resurrection of the dead. And the life of the world to come.

Commitment to Chastity and Life-Affirming Values

Pregnancy Decision Health Centers advocates the promotion of chastity and life-affirming values.

VOLUNTEER AGREEMENT

I am in agreement with the Nicene Creed, and I commit to a lifestyle of chastity (i.e., abstinence outside of marriage and fidelity during marriage) and life-affirming values. I agree to live a lifestyle consistent with PDHC's Mission, Principles of Service, and Core Values.

Signature

Date

Policy: Confidentiality

PDHC is committed to the confidentiality of its clients. Conversations both in person and on the phone will be maintained in strict confidence. Staff will not disclose client information to family or friends of those who come to or call PDHC without the written permission of the client.

Exceptions are as listed:

- 1. Client is suicidal*
- 2. Client is homicidal*
- 3. Client is a minor and in an abusive situation as defined by law.*

****ALL clients will be protected from disclosure of information that violates their right to privacy except where required by law (i.e., child abuse, suicide prevention, etc.).***

S.O.P.

1. *If questioned about a client's records or if asked any information about a client the correct response is:*
"Due to confidentiality, I cannot verify that the client has ever been seen by PDHC nor can I tell you that the requested information or record is on file."
 The party asking for information should contact the client and have the client come in herself.
2. PDHC personnel are responsible for maintaining the confidentiality of private information. Disclosure by and between volunteers and staff should occur only as necessary to carry out job functions.
3. All client records are to be kept in a secure file. Never leave client forms face up around the office or leave records unattended. Do not leave any notes or materials lying in the offices with client names on them.
4. Never remove client records from the office or take identifying information out of the office.

VOLUNTEER AGREEMENT

As a Volunteer of Pregnancy Decision Health Centers, I, _____, agree in principle and spirit with the policy and procedures outlined above and will follow them when serving as a representative of Pregnancy Decision Health Centers.

Signature

Date