

**CALIPATRIA STATE PRISON  
INMATE FAMILY COUNCIL VOLUNTEER AGREEMENT**

**VOLUNTEER NAME:** \_\_\_\_\_

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

\_\_\_\_\_

\_\_\_\_\_

**HOME PHONE:** \_\_\_\_\_

**CELL PHONE:** \_\_\_\_\_

**EMAIL ADDRESS:** \_\_\_\_\_

The following are the conditions accepted under this agreement:

1. Comply with all policies, procedures, rules, and regulations of the Calipatria State Prison Inmate Family Council (IFC) By-Laws.
2. Anything discussed in IFC meetings or obtained in the course of being an IFC member is considered **CONFIDENTIAL**. Confidential information is not to be shared, or discussed, with anyone other than between IFC members, the Warden, or the Warden's designated staff unless required by applicable law, regulations, or to report misconduct.
3. No salaries, wages, employment benefits, Worker's Compensation or special privileges (unless specifically approved by the Warden) will be received for participation.
4. Use of State supplies and equipment is prohibited, unless specifically approved by the Warden.
5. Participation as a volunteer member of the IFC is non-binding and may be terminated, at any time, by the Institution or the IFC in accordance with the IFC By-Laws.

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**SIGNATURE OF VOLUNTEER** **DATE**

**Reviewed and approved by:**

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**IFC CHAIRPERSON** **DATE**

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**WARDEN OR DESIGNEE** **DATE**