

Sample Organization Communication Policy

WORKER CONSENT FORM

Texting, emailing, and social media apps and other forms of electronic communication can play a vital role in communicating with all attendees but can have serious consequences if used improperly.

As an employee or volunteer worker of (organization name), I agree to abide by the organization's risk management policies and procedures relating to all electronic communication in connection with its program.

As part of that policy, I authorize (organization name) to obtain copies of phone or internet records related to my worker activities, if (organization name) needs these records to investigate or document an incident. I agree to help the organization obtain any records it requests.

I promise to release (organization name), including its officers, employees and agents, from any and all claims, liability, or causes of action for damages associated with this consent form. Damages may include, but are not limited to, such claims as breach of privacy, defamation, libel, slander, emotional distress, and/or negligence.

I have read and fully understand the provisions of this document. I acknowledge that I have decided to sign this form voluntarily.

Worker Name:		
Signature:	Date:	

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