

## MEMPHIS FARMERS MARKET POLICIES For Volunteers

The Memphis Farmers Market is a community-gathering place designed for the benefit and enjoyment of everyone. We welcome all to visit and participate in our mission to:

1. Improve public health nutrition options by providing a vehicle to educate the community on nutrition and good health
2. Provide access to local food choices
3. Assist area farmers, producers, and artisans with sustainable business opportunities
4. Generate a sense of local pride while furthering the economic development of our community
5. Serve as a community-gathering place

Our volunteers are crucial to the market experience and in helping us adhere to our mission.

### **General Volunteer Agreement**

By accepting a volunteer assignment with the Memphis Farmers Market, you acknowledge that you have read and agree to the terms outlined in our [Volunteer Informed Consent Agreement](#). [see below]

### **Age Requirements**

MFM volunteers must be 18 years or older. Volunteers under 18 years must submit a signed [MFM Minor Volunteer Release Form](#). [see below]

### **Volunteer Attire**

All volunteers who work market Saturdays are issued an apple-green VIP Volunteer T-shirt to be worn only when on duty at the market. All volunteers who work market Saturdays must wear the VIP apple-green tee (available in S, M, L, and XL) and

comfortable, family appropriate, go-get-em attire. Replacement T-shirts are available at cost.

### **Market Access**

Drives, parking lot, market entrances, vendor stalls, etc., must be accessible to all. If anything is obstructing access to any component of the market, please correct the situation or alert a board member. Remember that people with disabilities must be able to access and enjoy the same goods, services, and benefits available to all.

### **Animals**

No animals are allowed beneath the market pavilion, per health department requirements. Service animals are the only exception. "Service animal" is the correct, legal terminology for animals who assist people with disabilities.

If you see a customer inside the market pavilion with an animal, ask if the animal is a service animal. If the customer tells you it is, thank them, tell them to enjoy their visit at the market, and be on your way.

DO NOT PET OR SPEAK TO SERVICE ANIMALS. They are on the job, working.

If the animal is not a service animal, nicely explain that health department regulations prohibit non-service animals inside the market, then direct the visitor to the Petsitting Tent on the north end of the market.

### **ADA Program Statement**

Volunteers also play a critical role in ensuring that MFM complies with all laws and regulations pertaining to the Americans with Disabilities Act and its provisions.

When approaching any person who seems to be having difficulties, always ask: Would you like any assistance? If so, how may I assist you?

To that end, please read and familiarize yourself with MFM's [ADA Program Statement](#) [see below] and [People-First Language Tutorial](#) [see below].

### **Focus! Focus! Focus!**

Please, no texting, cell phone calls, smartphone access, earbud activities, or other distractions except when absolutely necessary. Volunteers are needed to help the market focus on its MFM customers and the good times we're all having together!

### **Smoking**

No smoking is allowed inside the Market Pavilion. Please direct smokers to areas outside the pavilion. If you are a smoker, please smoke discreetly near the storage shed on the east side of the pavilion and dispose of cigarette butts properly.

### **Eating & Drinking**

By all means, refresh! Re-energize! Drinks are free for working MFM volunteers during their shifts. Food is available for purchase. When eating, please do so discreetly and neatly and in such a way that it doesn't interfere with your market duties or the functions of your position. Keep food and drink away from merchandise and "front-of-table" positions.

### **MFM Merchandise for Volunteers**

After your 5th volunteer shift is complete, volunteers are eligible for 50% off all market merchandise!

### **Volunteer Commitment to Excellence**

Above all, be kind, friendly, patient, and understanding. Please arrive for your shift 5 or 10 minutes early. We rely on you to be available and ready for your shift and responsibilities.

Volunteers should always project a professional, helpful, personable, and customer-oriented presence to our vendors and customers — while getting the job done. We're all here to make sure everyone enjoys the special atmosphere and quality goods the market provides — and to have fun ourselves in the process!

**FINAL NOTE:**

Any time you feel unsure of what to do or how to handle a certain situation, notify the security guard, the Market Manager, or any MFM Board Member on site.

Thank you for all you do to help the nonprofit Memphis Farmers Market **GROW!!**

## **Memphis Farmers Market Volunteer Informed Consent Agreement**

I understand that as a volunteer with the Memphis Farmers Market (MFM), I am volunteering my services to MFM and its vendors in connection with various functions and services normally provided and conducted during the hours in which MFM is operating, as well as those times prior to opening and following closing of MFM.

I fully acknowledge and understand the nature of the volunteer activities that are typically performed by MFM volunteers, and I have taken all steps necessary to ask questions of relevant individuals concerning such activities.

I also understand that as an MFM volunteer, I may be asked to perform activities that involve physical activity, contact with unidentified and unfamiliar persons, travel to and from various unspecified locations, and other potential risks of injury.

In connection with my voluntary involvement in activities undertaken for and with the participation and support of MFM, I hereby agree, for myself, my heirs, assigns, executors and administrators, to forever release and discharge MFM, its officers and directors, employees, agents, and other volunteers from all liability and responsibility pertaining to any claims, demands, and actions resulting from injuries --- physical or mental --- sustained to myself and/or property as a result of my involvement in such activities, whether or not resulting from negligence. I agree to release and hold MFM, its officers and directors, employees, agents, and volunteers harmless from any cause or action, claim, or suit arising therefrom.

I hereby attest that my attendance and involvement in such activities is voluntary, that I am participating at my own risk, that I am aware of such risks, and that I have read the foregoing terms and conditions of this release.

Further, I hereby confirm, represent, and warrant that I have never been convicted of or charged with, in this state or any other, a violent crime, child abuse or neglect, child pornography, child abduction, kidnapping, rape, or any sexual offense, nor have I been ordered by a court, in this state or any other, to receive psychiatric or psychological treatment in connection therewith.

I confirm that I have never been terminated, suspended, placed on probation, reprimanded, or otherwise penalized by an employer for child abuse and/or maltreatment, or violent acts of any kind in this state or elsewhere. I attest that I have read and understood the terms and statements of this screening summary.

## Memphis Farmers Market Volunteer Minor Consent Form

(must be printed and signed by a parent or legal guardian)

We Welcome Our Young MFM Volunteer Partners!

My parent and/or guardian and I understand that as a volunteer with the Memphis Farmers Market (MFM), I am volunteering my services to MFM and its vendors in connection with various functions and services normally provided and conducted during the volunteer hours MFM operates, as well as those times for MFM-sponsored functions that lie outside of normal market days.

I fully acknowledge and understand the nature of the volunteer activities that are typically performed by MFM volunteers, and I have taken all steps necessary to ask questions of relevant individuals concerning such activities.

I also understand that as an MFM volunteer, I may be asked to perform activities that involve physical activity, contact with unidentified and unfamiliar persons, and other potential risks of injury.

In connection with my voluntary involvement in activities undertaken for and with the participation and support of MFM, I hereby agree, for myself, my heirs, assigns, executors and administrators to forever release and discharge MFM, its officers and directors, employees, agents, and volunteers from all liability and responsibility pertaining to any claims, demands, and actions resulting from injuries, physical or mental, sustained to my person and/or property as a result of my involvement in such activities whether or not resulting from negligence. I agree to release and hold MFM, its officers and directors, employees, agents, and volunteers harmless from any cause or action, claim, or suit arising therefrom.

I hereby attest that my attendance and involvement in such activities is voluntary, that I am participating at my own risk, that I am aware of such risks, and that I have read the foregoing terms and conditions of this release. The Parent/Guardian's Signature below is a valid signature from my legal representative in these matters.

Volunteer Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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

Parent/Guardian's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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

Please mail signed form to:  
Memphis Farmers Market  
c/o Center City Commission  
114 N. Main St.  
Memphis, TN 38103

**Memphis Farmers Market  
Americans with Disabilities Act (ADA) Program Statement  
for MFM Volunteers**

Awareness of disability related issues is increasing. Many people now understand to what extent site and building features can either impede or promote access. With the passage of the ADA, new emphasis has been placed on removing barriers to people with disabilities.

People with disabilities must be able to obtain or enjoy “the same goods, services, and benefits” that are provided to other members of the public. The following overview is a list of activities and services that --- if offered to the public --- must also be available to participants with disabilities:

- access via private automobile, taxi; or public transportation
- access to parking and entry into the market
- maneuverability around the site as needed to attend all activities and functions offered
- ability to attend performances, participate in activities, and enter exhibits
- ability to experience and enjoy activities of the event
- ability to select and purchase items at concessions and vendor stalls
- use of public toilet rooms, telephones, water fountains, and other typical common public amenities such as shelter from sun and rain
- access to first aid.

**The Importance of an Accessible Route**

Critical to the successful use of a site is the presence of an accessible route. It is the central component of accessibility that unites separate spaces, elements, and features into a usable whole. This single continuous accessible pedestrian path should be wide, smooth, as level as possible, without low or overhanging hazards or obstructions, and not require the use of stairs.

**Modifying Policies and Procedures**

Service animals should be allowed to accompany a person with a disability as needed. Service animals are not pets, but act as a guide for people with disabilities. They must be allowed to accompany the individual into the event unless it would constitute a fundamental alteration of a program.

Service animal means any animal individually trained to work or perform tasks for the benefit of an individual with a disability.

To ensure INCLUSION, FREEDOM, AND RESPECT  
for people with disabilities, we must use

## PEOPLE FIRST LANGUAGE

by Kathie Snow

The difference between the right word and the almost right word  
is the difference between lightning and the lightning bug.

*Mark Twain*

### Who are “the handicapped” or “the disabled?”

According to stereotypical myths, they are:

People who *suffer* from the *tragedy* of *birth defects*.

*Paraplegic heroes* who *struggle* to become *normal* again.

*Victims* who *fight* to *overcome* their *challenges*.

Categorically, they are called *retarded*, *autistic*, *blind*,  
*deaf*, *learning disabled*, etc., etc., etc.—*ad nauseum!*

### Who are they, really?

Moms & Dads . . . Sons & Daughters

Employees & Employers . . . Friends & Neighbors

Students & Teachers . . . Leaders & Followers

Scientists (Stephen Hawking)

Movie Stars (Marlee Matlin)

They are people.

*They are people, first.*

People with disabilities constitute our nation's largest minority group, which is simultaneously the most inclusive and the most diverse! Everyone's represented: people of both genders and of all ages, as well as individuals from all religions, ethnic backgrounds, and socioeconomic levels. Yet the only thing people with disabilities truly have in common with one another is dealing with societal misunderstanding, prejudice, and discrimination. Furthermore, the “disability community” is the only minority group which any one can join, at any time. Some join at

birth. Others join in the split second of an accident, through illness, or by the aging process. If and when it happens to you, will you have more in common with others who have disabilities or with family, friends, and co-workers? And how will you want to be described? How will you want to be treated? Disability issues affect all Americans!

### Inaccurate Descriptors

“The handicapped” is an archaic term—it's no longer used in any federal legislation—that evokes negative images (pity, fear, and more). The origin of the word is from an “Old English” bartering game, in which the loser was left with his “hand in his cap,” and he was thought to be at a *disadvantage*. A legendary origin refers to a person with a disability begging with his “cap in his hand.” This antiquated, pejorative term perpetuates the stereotypical perception that people with disabilities are a homogenous group of pitiful, needy people! People who have brown hair (or those who share any other characteristic) are not all alike; similarly, individuals who have disabilities are not alike. In fact, people with disabilities are more *like* people without disabilities than different!

We've all seen parking spaces, hotel rooms, and other structures labeled “handicapped”—as a reference that something is useful to all people with disabilities. But these particular accommodations are designed to improve access for people with physical disabilities. In general, these modifications have no benefit for people with other types of disabilities. This

is just one example of the inaccuracy and misuse of the "H-word" as a generic descriptor. (The accurate term for modified parking spaces, hotel rooms, etc. is "accessible.")

"Disabled" is not an appropriate descriptor, either. Our society corrupts the meanings of words. Traffic reporters frequently use the term, "disabled vehicle." In that context, "disabled" means "broken down." People with disabilities are human beings and they're not broken!

If a new toaster doesn't work, we say, "It's defective!" and we return it for a new one! Shall we return babies who have "birth defects?" The respectful term is "congenital disability."

Many parents say, "I have a child with special needs." This frequently provokes pity, as demonstrated by an "Oh, I'm so sorry," response, a sad look, or a sympathetic pat on the arm. [Gag!] A person's needs aren't "special" to him—they're ordinary! I've never met an adult with a disability who wants to be known as "special." Will we learn from those with real experience and no longer inflict this pity-laden descriptor on children?

### The Power of Language & Labels

Words are powerful. Old, inaccurate, and inappropriate descriptors perpetuate negative stereotypes and attitudinal barriers. When we describe people by their labels or medical diagnoses, we devalue and disrespect them as individuals. What is the purpose of a disability label? It's a sociopolitical passport for services! But we mistakenly use labels to determine how/where people with disabilities will be educated, what type of job they will/won't have, where/how they'll live, and more. Worse, labels are frequently used to define a person's potential and value! In the process, we crush people's hopes and dreams and relegate them to the margins of society.

### Disability is Not the "Problem"

Society tends to view disability as a "problem," so much so that "problem" seems to be the #1 word used about people with disabilities. People *without* disabilities, however, don't spend a lot of time talking about their "problems." They realize this would

be counterproductive to one's image, as well as inaccurate. A person who wears glasses doesn't say, "I have a problem seeing." She says, "I wear [or need] glasses."

Let's recognize that what we call a "problem" actually reflects a need. Thus, Susan doesn't "have a problem walking," she "needs/uses a wheelchair." Ryan doesn't "have behavior problems;" he "needs behavior supports." When will people without disabilities begin speaking about people with disabilities in the same respectful way they speak about themselves? Do you want to be known by your "problems" or by the multitude of positive characteristics which make you the unique individual you are?

Then there's the "something wrong" descriptor, as in, "We knew there was something wrong when..." What must it make a child feel like, to hear his parents repeat this over and over and over again, throughout his childhood? How would you feel?

### The real problems are attitudinal and environmental barriers.

If educators held the attitude that children with disabilities are boys and girls who have the potential to learn, who need the same quality of education as their brothers and sisters, and who have a future in the adult world of work, we wouldn't need to advocate for inclusive education.

If employers held the attitude that adults with disabilities have valuable job skills and can contribute to the success of a business, we wouldn't need to advocate for real jobs for real pay in the community.

If business owners held the attitude that people with disabilities are consumers with money to spend, we wouldn't need to advocate for accessible entrances and other accommodations.

### What Is a Disability?

Is there a universally-accepted definition of disability? No! What constitutes a disability depends on who you ask and what type of services a person receives. In its most basic form, a disability label is a medical diagnosis or a legal status. Beyond that, the definition is up for grabs! The disability criteria for early childhood services is different from vocational-rehabilitation services; these are different from special

ed or worker's compensation criteria, and on and on and on. Thus, disability is a *social construct*, created to identify people who may be the beneficiaries of services, entitlements, or legal protections.

### A New Paradigm of Disability

**"Disability is a natural part of the human condition..."**

*U.S. Developmental Disabilities Act  
and The Bill of Rights Act, 1993*

Yes, disability is natural, and it can be redefined as a "body part that works differently." A person with a physical disability has legs or arms that work differently, a person with a cognitive disability learns differently, a person with autism has a brain that works differently, and so forth. And when we recognize that the body parts of people *without* disabilities are different, we'll also recognize that it's the "degree of difference"—the *way* these differences affect them and/or the need for services, entitlements, or legal protections—which creates the need for labels.

*A disability, like gender and ethnicity, is simply one of many natural characteristics of being human. One in five Americans is a person with a disability! People with disabilities cannot be defined by this one characteristic, any more than others can be defined by their gender, ethnicity, religion, sexual orientation, hair color, or anything else!*

Additionally, a disability is often a *consequence of the environment*. It's interesting to observe how many kids with learning disabilities, attention deficit disorder, and other conditions aren't diagnosed until they enter public school! Life was fine when they were young children at home or in daycare settings. But within the structure of public school, they're deemed to have a disability. Is it possible that their learning styles simply don't mesh with the teaching style at school? Why do we "blame" the child and label him? Why don't we modify the environment by providing him with a variety of ways to learn that meet his needs?

When a person is in a welcoming, accessible environment, and when he has the appropriate supports, accommodations, and tools, does he still have a disability? I think not. *Disability is not a constant state*; the "medical condition" and how it affects a person at any given time is frequently more a consequence of the environment than how the person's "body parts" actually operate.

### Using People First Language is Crucial!

People first language puts the person before the disability; and it describes what a person *has*, not what a person *is*.

Are you "myopic" or do you wear glasses?  
Are you "cancerous" or do you have cancer?  
Are you "freckled" or do you have freckles?  
Is a person "handicapped" or "disabled"  
or does she have a disability?

If people with disabilities are to be included in all aspects of our communities—in the ordinary, wonderful, and typical activities most people take for granted—we must use the ordinary, wonderful, typical language used about people who don't have disabilities.

Children with disabilities are children, first. The only labels they need are their names! Parents must not talk about their children in the clinical terms used by professionals. The parent of a child who wears glasses (medical diagnosis: myopia) doesn't say, "My daughter is myopic," so why does the parent of a child who has a medical diagnosis of autism say, "My daughter is autistic.?"

Adults with disabilities are adults, first. The only labels they need are their names! They must not talk about themselves the way professionals talk about them. An adult with a medical diagnosis of cancer doesn't say, "I'm cancerous," so why does an adult with a diagnosis of cerebral palsy say, "I'm disabled.?"

The only places where the use of disability labels is appropriate or relevant are in the service system (at those ubiquitous "I" team meetings) and in medical or legal settings. Labels have no place—and they should be irrelevant—within our families, among friends, and within the community.

We often use labels to convey information, as when a parent says, "My child has Down Syndrome," hoping others will realize her child needs certain accommodations or supports. But the outcome of sharing the label can be less than desirable! A label can scare people, generate pity, and/or set up exclusion ("We can't handle people *like that*"). In these circumstances, *and when it's appropriate*, we can simply describe the person's needs in a respectful, dignified manner and omit the label.

Besides, *the label is nobody's business!* Have individuals with disabilities given us permission to share their personal information with others? If not, how dare we violate their trust! Do you routinely tell every Tom, Dick, and Harry about the boil on your spouse's behind? (I hope not!) And we also talk about people with disabilities *in front of them, as if they're not there.* We must stop this demeaning practice.

**My son, Benjamin, is 16 years old.** More important than his disability label are his interests, strengths, and dreams. He loves *Star Wars*, anything "Harry Potter," fish sticks with malt vinegar, writing plays and stories on the computer, and his Pez collection. He earned two karate belts and has been in four children's theater productions. Benj wants to be a movie critic when he grows up. He has blonde hair, blue eyes, and cerebral palsy. His disability is only one of many characteristics of his whole persona. He is not his diagnosis. His potential cannot be defined by his disability label.

When I meet new people, I don't tell them I'll never be a prima ballerina. I focus on my strengths,

not on what I cannot do. Don't you do the same? So when speaking about my son, I don't say, "Benj can't write with a pencil." I say, "Benj writes on a computer." I don't say, "He can't walk." I say, "He uses a power chair." It's a simple matter of perspective.

A person's self-image is strongly tied to the words used to describe him. For generations, people with disabilities have been described in negative, stereotypical language which has created harmful, mythical portrayals. We must stop believing (and perpetuating) the myths—the lies—of labels. We must believe children and adults with disabilities are unique individuals with unlimited potential to achieve their dreams, just like all Americans.

We have the power to create a new paradigm of disability. In doing so, we'll not only influence societal attitudes—we'll also be changing the lives of children and adults with disabilities, and our own lives, as well.

Isn't it time to make this change?  
If not now, when? If not you, who?  
People First Language is right.  
Just do it—NOW!

### EXAMPLES OF PEOPLE FIRST LANGUAGE

**Say:**

People with disabilities.  
He has a cognitive disability.  
She has autism.  
He has Down Syndrome.  
She has a learning disability.  
He has a physical disability.  
She's of short stature/she's a little person.  
He has an emotional/mental health disability.  
She uses a wheelchair/mobility chair.  
He receives special ed services.  
Typical kids or kids without disabilities.  
Congenital disability.  
Brain injury.  
Accessible parking, hotel room, etc.  
She needs . . . or she uses . . .

**Instead of:**

The handicapped or disabled.  
He's mentally retarded.  
She's autistic.  
He's Down's.  
She's learning disabled.  
He's a quadriplegic/crippled.  
She's a dwarf/midget.  
He's emotionally disturbed.  
She's wheelchair bound/confined to a wheelchair.  
He's in special ed.  
Normal or healthy kids.  
Birth defect.  
Brain damaged.  
Handicapped parking, hotel room, etc.  
She has a problem with . . .

**And no more "special needs!"** That term evokes pity, and a person's needs aren't special to him, they're normal and ordinary! Keep thinking—there are many descriptors we need to change.

This document may be copied and shared with others. As a courtesy, please let me know you're using it.  
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Please visit [www.disabilityisnatural.com](http://www.disabilityisnatural.com) for other new ways of thinking!

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