

LAKES AREA HFH VOLUNTEER SURVEY

DATE _____

REV 3/07

LAST NAME _____ FIRST NAME _____ BIRTHDATE _____

ADDRESS _____ CITY _____

STATE _____ ZIP _____ SPOUSE'S NAME _____

HOME PHONE _____ CELL _____ WORK _____ FAX _____

EMAIL _____ CHURCH AFFILIATE _____ EMPLOYER _____

CIRCLE TIMES YOU COULD WORK: MON - FRI MORNINGS MON - FRI AFTERNOONS SATURDAYS

HOW OFTEN WOULD YOU LIKE TO VOLUNTEER? ANYTIME WEEKLY MONTHLY QUARTERLY

ARE YOU A SEASONAL RESIDENT? YES NO AVAILABLE FROM _____ TO _____

PLEASE CHECK THE AREAS THAT YOU ARE INTERESTED IN.

OFFICE SUPPORT:

- WORD PROCESSING
- BULK MAIL
- FILING
- PHONE WORK

CONSTRUCTION

- CABINETS
- CONCRETE
- FINISH WORK
- FRAMING
- LANDSCAPING
- PAINTING
- ROOFING
- SHEETROCK
- VINYL SIDING

LEADERSHIP

- SITE SUPERVISOR
- CONSTRUCTION SKILLS INSTRUCTOR

HABITAT RESTORE

- CASHIER
- PRICING/PROCESSING ITEMS
- DONATION SOLICITATION
- HOUSE SALVAGE CREWS
- SALVAGE MATERIAL PICK-UPS

MISCELLANEOUS

- FOOD PREP FOR EVENTS OR WORK CREWS

- I HAVE A TRUCK OR TRAILER TO HELP WITH DONATION PICK-UPS

Please circle which one.

PLEASE CHECK THE COMMITTEES YOU WOULD BE WILLING TO SERVE ON:

- CHURCH RELATIONS
- FAMILY SELECTION
- FAMILY SUPPORT
- FUND DEVELOPMENT

- LAND ACQUISITION
- SPECIAL EVENTS
- RESTORE BUSINESS & MARKETING COMMITTEE

I HAVE SOMETHING TO DONATE:

- CABIN/HOME
- BUILDING MATERIALS
- LANDSCAPING MATERIALS

- FINANCIAL SUPPORT
- BUILDING SITES/LAND
- ALUMINUM CANS

- PLEASE PUT ME ON YOUR INACTIVE LIST

IS THERE ANYTHING THAT YOU WOULD LIKE US TO KNOW ABOUT YOU? _____

Mail to PO Box 234, Brainerd MN 56401

Phone: 218.828.8517

web: www.lakesareahabitat.org

PLEASE COMPLETE AND SIGN THE VOLUNTEER RELEASE & WAIVER FORM.

VOLUNTEER ID _____ ENTERED DATE _____ WAIVER FORM ON FILE Y N DATE OF FORM _____

LAKES AREA HABITAT FOR HUMANITY

RELEASE AND WAIVER OF LIABILITY

PLEASE READ CAREFULLY! THIS IS A LEGAL DOCUMENT THAT AFFECTS YOUR LEGAL RIGHTS!

This Release and Waiver of Liability (the "Release") executed on _____ (date),
By (please print) _____ in favor of Habitat for Humanity International, Inc., a nonprofit corporation, and Lakes Area Habitat for Humanity Inc., a Minnesota nonprofit corporation, their directors, officers, employees, and agents (collectively, "Habitat").

The volunteer desires to work as a volunteer for Habitat and engage in the activities related to being a volunteer (the "Activities"). The volunteer understands that the Activities may include construction and rehabilitating residential buildings, working in the Habitat office, and living in housing provided for volunteers of Habitat.

The Volunteer hereby freely, voluntarily, and without duress executes their Release under the following terms:

1. Release and Waiver. Volunteer does hereby release and forever discharge and hold harmless Habitat and its successors and assigns from any and all liability, claims, and demands of whatever kind or nature, either in law or in equity, which arise or may hereafter arise from Volunteer's activities with Habitat. Volunteer understands that this Release discharges Habitat from any liability or claim that the Volunteer may have against Habitat with respect to any bodily injury, illness, death, or property damage that may result from Volunteer's Activities with Habitat, whether caused by the negligence of Habitat or its officers, directors, employees, or agents or otherwise. Volunteer also understands that Habitat does not assume any responsibility for/or obligation to provide financial assistance or other assistance. Including but not limited to medical, health, or disability insurance in the event of injury or illness.

2. Medical Treatment. Volunteer does hereby release and forever discharge Habitat from any claim whatsoever which arises or may hereafter arise on account of any first aid, treatment, or service rendered in connection with the Volunteer's Activities with Habitat.

3. Assumption of the Risk. The Volunteer understands that the Activities included work that may be hazardous to the volunteer, including, but not limited to, construction, loading and unloading, and transportation to and from the work sites. Volunteer hereby expressly and specifically assumes the risk of injury, illness, death, or property damage resulting from the Activities.

4. Insurance. The Volunteer understands that, except as otherwise agreed to by Habitat does not carry or maintain health, medical, or disability insurance coverage for any Volunteer. Each Volunteer is expected and encouraged to obtain his or her own medical or health insurance coverage.

5. Photographic Release. Volunteer does hereby grant and convey unto Habitat all right, title, and interest in any and all photographic images and video or audio recordings made by Habitat during the Volunteer's Activities with Habitat, including, but not limited to, any royalties, proceeds, or other benefits derived from such photographs or recordings.

6. Other. Volunteer expresses that this Release is intended to be as broad and inclusive as permitted by the laws of the State of Minnesota, and that this Release shall be governed by and interpreted in accordance with the laws of the State of Minnesota. Volunteer agrees that in the event that any clause or provision of this Release shall be held to be valid by any court of competent jurisdiction, the invalidity of such clause or provision shall not otherwise affect the remaining provisions of this Release which shall continue.

7. Lakes Area Habitat for Humanity, in compliance with Habitat for Humanity International Policy, reserves the right to check volunteer applications against sexual offender registration lists and to terminate a volunteer from service if found on such lists.

Emergency Contact: _____ Phone: _____

Reference (someone other than a relative): _____ Phone: _____

IN WITNESS WEROF, Volunteer has executed this Release as of the day and year first above written.

Volunteer Signature: _____

Witness (print): _____ Signature: _____