

Volunteer Information Form

Mr/Mrs/ First Name		Middle Name	Last Name	
Address (home)		Apt/Unit Number	City	Zip Code
Phone (home/cell)	Phone (work)		Volunteer Date	Date of Birth
☐ Male ☐ Female	E-mail Address (personal)			
Employer		Posit	ion Title	
Volunteering with employer or group (Y / N)	Group Name			Are you a veteran? (Y / N)
Are you currently serving in the military? (Y / N)	If so, what branch of service?		Do you have a f	amily member

Requirements:

- No previous experience is required. We provide all the tools and equipment needed.
- All volunteers must be at least 16 years of age to work on the construction sites and 14 years of age in the ReStores.
- All volunteers must bring this form, the Emergency Contact Form and the Waiver and Release of Liability Form.
- Minors must have a parent or guardian sign the Waiver and Release of Liability Form and bring it on their volunteer day.

What to Bring to the Construction Site and ReStores:

- Sturdy, closed toed shoes (required).
- A sack luch, unless you or your group is bringing lunch.
- Sunscreen, hat and glasses (optional).
- A water bottle! We have large jugs of water on site to refill.

Our Mission

Seeking to put God's love into action, Habitat for Humanity brings people together to build homes, communities and hope.

How does it work?

Through volunteer labor and donations of money and materials, Habitat builds and rehabilitates simple, decent houses with the help of the homeowner (partner) families. Habitat houses are sold to partner families at no profit, financed with affordable, no-interest loans. The homeowners' monthly mortgage payments are used to build even more Habitat houses. Habitat for Humanity provides a hand-up, not a hand-out. In addition to a down payment and the monthly mortgage payments, partner families invest hundreds of hours of their own labor — called sweat equity — into building their Habitat house and the houses of others.



Emergency Contact Form

First Name		Last Name				\	/olunteer	Date	
In case of Emergency P	lease Contact:								
First and Last Name				Relation					
Work Phone		Cell Phone							
Address			City			State		Zip	
The following informati history.	on may be needed b	y any hospital or i	-		_	ccess t	o the volu	unteer's	s medical
Allergies			1	cations Curre Being Taken	ently				
Blood Type	Date of Last Tetanus Shot	Personal Ph	nysician				Phone		
Address		City				State		Zip	
Heath Insurance Provider		Policy Number					rance gent		
Medical Contact Info:									
Doctor Name			Phone #	#					
Do you have a preferre	d Hospital or Physic	ian if Emergency	Freatme	nt is required	d? If so, ple	ase list	:		
Hospital -or- Physician				City -	or- Phone i	#			
I have voluntarily provid representatives to cont						of Gred	ater Los A	Ingeles	and its
Volunteer Signature					Date				



Release & Waiver of Liability

I acknowledge that I have voluntarily applied to Habitat for Hu ReStore, office and/or other volunteer activities ("Volunteer A that Volunteer Activities are hazardous. I am voluntarily partic danger involved. I hereby agree to assume any and all risks of initials here.	ctivities") at locations in the State of California. I am aware ipating in these Volunteers Activities with the knowledge of the
or partial paralysis, brain damage, serious injury to internal org	eath, serious neck and spinal injuries which may result in complete gans, serious injuries to the musculoskeletal system, loss of hand(s), ch may result in serious and permanent injury to a loss of an eye(s), nealth and well-being.
participate in these activities and use their tools and facilities, guardians and legal representatives will not make a claim again	nst, sue or attach the property of Habitat for Humanity of Greater my tools or equipment that I use in these activities, for injury or emands that I, my assignees, heirs, guardians and legal
images and video / audio recordings made by Habitat for Hum	er Los Angeles all right, title, and interest in any and all photographi anity of Greater Los Angeles during my activities with Habitat for any royalties or other benefits derived from such photographs or
I HAVE CAREFULLY READ THIS ASSUMPTION OF RISK, RELEAS UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RE HABITAT FOR HUMANITY OF GREATER LOS ANGELES AND AN DOCUMENT OF MY OWN FREE WILL.	ELEASE OF LIABILITY AND A CONTRACT BETWEEN ME AND
Executed of on this day (month)	Year
Volunteer Name (printed)	Volunteer Signature
Parent/Legal Guardian Name (printed)	Parent/Legal Guardian Signature (if applicable)

If volunteer is under the age of 18, his/her parent or legal guardian must sign. No one under the age of 16 is permitted to volunteer on the construction site, and no one under the age of 14 is permitted to volunteer in the ReStore.