

Volunteer Application

Complete Both Sides

Full Name	ne: Alias/	Maiden Name:
Street Ad	ddress:City, S	itate, Zip:
Phone (H	H): () Work: ()	Cell: ()
Email:		
🗌 l wo	ould like to receive periodic e-mails with updates and	information about Tri-County Partners Habitat for Humanity
Employer	er: Occupati	on:
Date of B	Birth: M: F: Religious Affiliat	ion (Optional):
Congrega	ation (Optional):	Volunteer Frequency: Weekly: Monthly:
Type of volunteering:		Occasional: One Time:
Construct	ction Skill / Experience:	
Skill Leve	el: Professional: Skilled: Unskilled, but willing	to learn:
-	nformation: This section is only to be filled out by ind y, religious group, civic group, or group of friends (2 d	ividuals registering as a member of a group or sponsor, such as a or more) who are registering to work together:
Group Na	lame:Gro	up Representative:
Group Re	ep. Number () Gro	up Rep. Email:
Have you	u been:	
 A. Convicted of any crime against children or other persons (aggravated murder, first or second degree murder; first or second degree kidnapping, first, second or third degree assault: first, second or third degree assault of a child: first, second or third degree rape; first second or third rape of a child; first or second degree robbery, first degree assault of a child: first, second or third degree manslaughter; first or second degree extortion; indecent liberties; incest; vehicular homicide; first degree promoting prostitution, communication with a minor; unlawful imprisonment; simple assault; sexual exploitation or minors; first or second degree criminal mistreatment; child abuse or neglect as defined in RCW 26,44.020: first or second degree exual misconduct with a minor; first or second degree rape of a child; patronizing a juvenile prostitute; child abandonment; promoting pornography; sell or distributing erotic material to a minor; custodial assault; violation of child abuse restraining order; child buying or selling; prostitution; felony indecent exposure; or any of these crimes as they may be renamed in the future?) Yes:		
correct. I response applicant	I understand that this offer to volunteer with Tri-Cour e from the Washington State Patrol and/or federal law	perjury under the state of Washington that the foregoing is true and ity Partners: Habitat for Humanity is contingent upon an acceptable or enforcement agency, whose criminal history review will be sought of all Habitat for Humanity may, at its discretion, precluded me from volunteer applete statements:
Signature of Applicant:		Date:

Signature of Parent/Guardian (Applicant Ages 16-18):_____

Release & Waiver of Liability

PLEASE READ CAREFULLY! AND INITIAL AND SIGN APPROPRIATELY. This is a legal document. Ig you do not understand any of the words or language of this document, please contact our Volunteer Coordinator for clarification. ALL volunteers must sign the waiver before working. There are inherent safety issues involved with residential construction. We promote safe work habits through oversight by construction supervision; however, what is safe for one person under certain circumstances may not be safe for you under different circumstances. Do not conduct a work task unless you're certain that of this document, please contact our Volunteer Coordinator for clarification. ALL volunteers must sign the waiver before working. There are inherent safety issues involved with residential construction. We promote safe work habits through oversight by construction supervision; however, what is safe for one person under certain circumstances may not be safe for you under different circumstances. Do not conduct a work habits through oversight by construction supervision; however, what is safe for one person under certain circumstances may not be safe for you under different circumstances. Do not conduct a work task unless you're certain that you can conduct the task safely. Tri-County Partners Habitat for Humanity screens ALL potential, volunteers, staff (whether paid or unpaid), board members and applicant families on the National Sex Offender Public Registry. Each person is also subject to a criminal background check. By completing this application, you are submitting to such inquiries.

I, (please print clearly)______, the Volunteer, hereby freely, voluntarily and without duress execute this release under the following terms:

I, for myself and on behalf of my heirs, successors, and representatives, do hereby knowingly and voluntarily waive any and all claims against Tri-County Partners Habitat for Humanity, its officers, directors, employees, agents and volunteers for any bodily injury, personal injury, including death, illness, property damage, and/or economic or non-economic losses which I may suffer arising from the performance of construction and related activities for, on behalf of or in partnership with Tri-County Partners Habitat for Humanity.

I, the Volunteer, understand that my activities may include work that may be hazardous to me, including, but not limited to the following: construction; loading and unloading; travel to and from the worksites; and exposure to lead, asbestos, and mold, which may cause or worsen certain illnesses, especially if I do not wear protective equipment, am exposed for extended periods of time, or have a preexisting immune system deficiency.

I, the Volunteer, understand and acknowledge that by this release I knowingly assume the risk of injury, harm and loss associated with the activities. I release the released parties from all liability for harm and loss cost, expense, injury, illness, death, or property damage resulting directly or indirectly for the activities.

Photo Release: Volunteer does hereby grant and convey unto Habitat all rights, titles, 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.

Insurance: Volunteer understands that, except as otherwise agreed by Habitat in writing, 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 disability and health insurance coverage. The volunteer's disability and health insurance is primary to any coverage that may be obtained by Habitat.

Other: Volunteer expressly agrees that this release in intended to be as broad and inclusive and permitted by the State of Washington, and that this release shall be held to be valid in any court of complete jurisdiction. The invalidity of such clause or provision shall not otherwise affect the remaining provisions of the release which shall continue to be enforced.

I, the Volunteer, represent that I am duly authorized to execute and deliver this waiver for myself and for the above-mentioned people. I understand the effect of this waiver and recognize my right to seek legal counsel before signing.

(Please Initial) I, the Volunteer, understand and give my permission for Habitat for Humanity to conduct a criminal background check and sex offender registry check.

Volunteer Signature:	Emergency Contact Name:
Date:	Contact Phone: ()

The following to be completed if the Volunteer is under the age of 18 (must be above the age of 16 to work on the site and are not allowed to handle any power tools, excavation, demolition, working on rooftops, or similar activities)

Parent/Guardian	Signature:
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Date:_

Printed Name: