

# Volunteer Application

## Contact Information

Date \_\_\_\_\_

Name: \_\_\_\_\_  
First Last

Home Phone # \_\_\_\_\_

Address: \_\_\_\_\_

Mobile # \_\_\_\_\_

\_\_\_\_\_  
City State Zip

Email Address: \_\_\_\_\_

Preferred Contact Method:  Home Phone  Mobile  Email

## Areas of Interest

Habitat for Humanity of St. Joseph County, MI (HFHSJCM) has many different areas that you can volunteer. Please check any areas below in which you would be interested in volunteering. We are just trying to get an idea of where you would like to volunteer, skill level or expertise does not have to be part of this decision.

- |                                       |   |  |
|---------------------------------------|---|--|
| <input type="checkbox"/> Construction | <input type="checkbox"/> Selecting Partner Families | <input type="checkbox"/> Website Design      |
| <input type="checkbox"/> Social Media | <input type="checkbox"/> Planning Fundraisers       | <input type="checkbox"/> Administrative Work |
| <input type="checkbox"/> Photography  | <input type="checkbox"/> Volunteer Coordination     | <input type="checkbox"/> Other _____         |

Please tell us of any experience, skills, or talents you think may be helpful to Habitat for Humanity:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## Profile:

Are You 16 YRS or Olders  YES  NO

18 YRS or Older  YES  NO

You consent to a Criminal Background  YES  NO

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

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

### OFFICE USE ONLY

- Liability Waiver  
 YES  NO Date \_\_\_\_\_
- Cleared Background Check  
 YES  NO Date \_\_\_\_\_
- Construction Safety  
 YES  NO Date \_\_\_\_\_
- Confidentiality Form  
 YES  NO Date \_\_\_\_\_

**Volunteer Agreement,**  
**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") is executed on this \_\_\_\_ day of \_\_\_\_\_, 2017, by \_\_\_\_\_, (the "Volunteer"), in favor of **Habitat for Humanity of St. Joseph County, Inc., a Michigan Non-Profit Corporation**, Habitat for Humanity International, Inc. and any other Habitat for Humanity affiliated organization<sup>1</sup>, and their respective affiliates, directors, officers, trustees, employees, sponsors, donors, volunteers and agents (collectively, the "Released Parties").

I, the Volunteer, desire to work as a volunteer for one or more of the Released Parties without compensation and engage in the activities related to being a volunteer. I understand that my activities may include but are not limited to the following: working at Habitat for Humanity offices and worksites; working in or for Habitat for Humanity ReStore operations; loading and unloading materials; traveling to and from work sites, towns, cities or countries; consuming food available or provided; living in housing provided for volunteers; assisting in disaster relief areas; constructing and rehabilitating residential buildings; other construction-related activities; and other volunteer activities ("Activities").

I, the Volunteer, understand that my Activities may include work that may be hazardous to me, including, but not limited to, 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 pre-existing immune system deficiency.

I also understand there is some inherent risk in consuming local foods and living in local accommodations in the city(ies) or country(ies) visited. I further understand I may be traveling to and from locations where there is a risk of terrorism, war, insurrection, criminal activities, instability, inclement weather or other circumstances that could threaten my health or safety. I also understand that it is the policy of the Released Parties not to pay ransom or make any other payments to secure the release of hostages.

I, the Volunteer, hereby freely, voluntarily and without duress execute this Release under the following terms:

**Release and Waiver.** In consideration of and in order to be allowed to participate in the Activities, I, the Volunteer, do hereby release and forever discharge and hold harmless the Released Parties and their successors and assigns from any and all liability, claims, demands, costs and damages of any kind, whether arising from tort, contract or otherwise, which I or my heirs, assigns, next of kin or legal representatives may have or which may hereinafter accrue, arise from, or are in any way related to my Activities with any of the Released Parties, including but not limited to personal injury, bodily injury, illness, property damage, loss or death, whether caused wholly or in part by the simple negligence, fault or other misconduct of any of the Released Parties or of other volunteers, other than their intentional or grossly negligent conduct.

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<sup>1</sup> Each Habitat for Humanity affiliate is an independently owned and operated non-profit corporation. Habitat for Humanity International, Inc. does not own, operate, or control the activities of Habitat for Humanity affiliated organizations.

I understand and acknowledge that by signing this Release I knowingly assume the risk of injury, harm, damage and loss associated with the Activities. I also understand that the Released Parties do 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, illness, death or property damage.

*I understand and acknowledge that children under the age of 16 are not allowed on Habitat for Humanity worksites while construction is in progress. While minors between the ages of 16 and 18 may be allowed to participate in some types of construction work, I understand that using power tools, excavation, demolition, working on rooftops and similar activities are not permitted for anyone under the age of 18. I agree it is my responsibility to communicate these requirements to any of my minor children who will attend and/or participate in the Activities.*

**Consent to Transportation and Medical Treatment.** I consent to the use of first aid treatment and the use of generic and over the counter medications and treatments as directed by manufacturer labels, whether administered by the Released Parties or first aid personnel. In an emergency, I understand the Released Parties may try to contact the individual listed below as an emergency contact. If an emergency contact cannot be reached promptly, I hereby authorize the Released Parties to act as an agent for me to consent to any examination, testing, x-rays, medical, dental or surgical treatment for me as advised by a physician, dentist or other health care provider. This includes, but is not limited to, my assessment, evaluation, medical care and treatment, anesthesia, hospitalization, or other health care treatment or procedure as advised by a physician, dentist or other health care provider. I also authorize the Released Parties to arrange for transportation of me as deemed necessary and appropriate in their discretion. I, the Volunteer, do hereby release, forever discharge and hold harmless the Released Parties from any liability, claim, demand, and action whatsoever brought by me or on my behalf which arises or may hereafter arise on account of any transportation, first aid, assessment, care, treatment, response or service rendered in connection with my Activities with any of the Released Parties.

If the Volunteer is less than 18 years of age, the parent(s) having legal custody and/or the legal guardian(s) of the Volunteer also hereby release, forever discharge and hold harmless the Released Parties from any liability, claim, demand and action whatsoever brought by such volunteer or on his/her behalf which arises or may hereafter arise on account of the decision by any representative or agent of the Released Parties to exercise the power to transport, administer first aid, and consent to assessment, examination, x-rays, medical, dental, surgical or other such health care treatment as set forth in the Parental Authorization for Treatment of, and Travel With, a Minor Child.

**Insurance.** I understand that, except as otherwise agreed to by the Released Parties in writing, the Released Parties are under no obligation to provide, carry or maintain health, medical, travel, disability or other insurance coverage for any Volunteer. Each Volunteer is expected and encouraged to obtain his or her own health, medical, travel, disability or other insurance coverage.

I understand that I am and remain responsible for payment of such hospital, physician, ambulance, dental, medical or other services obtained for me or my child. I agree that the Released Parties do not assume any responsibility for the payment of such fees or expenses which may be incurred. If I have health insurance, I understand my personal health insurance is my primary coverage.

**Confidentiality.** I agree that in the course of my participation in the Activities, I may have access to personal and/or health care information of other persons. I agree to maintain the confidentiality of such information, to use such information only as necessary to do my job as a volunteer, and to comply with Habitat for applicable policies regarding such information.

**Photographic/Recording RELEASE.** I hereby grant and convey unto Habitat for Humanity International, Inc. and Habitat for Humanity of St. Joseph County, Inc. all right, title and interest in any and all photographs and video/audio/electronic recordings of me, including as to my name, image and voice, made by or on behalf of any of the Released Parties during my Activities with the Released Parties, including, but not limited to, the right to use such materials for any purpose and to any royalties, proceeds or other benefits derived from them. I understand that I will not have any ownership interest in or to such photographs, images and/or recordings, I have not been provided or promised any compensation to me, and I hereby waive any rights, privileges or claims based on any right of publicity, privacy, ownership or any other rights arising, relating to or resulting from the photographs, images and/or recordings. I understand and agree that this paragraph also applies to my minor child(ren) who are volunteering.

**Other.** I expressly agree that this Release is intended to be as broad and inclusive as permitted by state law. I further agree that in the event any clause or provision of this Release is held invalid by any court of competent jurisdiction, the invalidity of such clause or provision shall not otherwise affect the remaining clauses or provisions of this Release, which shall continue to be enforceable. Further, a waiver of a right under this Release by a Released Party does not prevent the exercise of any other right.

I have carefully considered my decision; the benefits and risks involved and hereby give my informed consent to participate in all volunteer Activities. I have read and understand this Release and Waiver of Liability, any questions of mine have been answered, and I voluntarily agree to the above provisions. It is my intent to bind my heirs, next of kin, assigns and legal representative.

**SIGNATURE OF VOLUNTEER 18 YEARS OR OLDER:**

**Volunteer:** Name (please print): \_\_\_\_\_ Signature: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: (H) \_\_\_\_\_ (C) \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Email: \_\_\_\_\_

**Witness:** Name (please print): \_\_\_\_\_ Signature: \_\_\_\_\_

EMERGENCY CONTACT INFORMATION FOR VOLUNTEER OVER 18 YEARS OF AGE:	
Name: _____	Relationship: _____
Address: _____	
Phone: (H) _____	(C) _____ (W) _____
Email: _____	

## Confidentiality Agreement

It is essential that anyone affiliated with Habitat for Humanity of St. Joseph County, MI (HFHSJCMC board, staff and committee members) commit to preserve the security and privacy of confidential information regarding all associates who have entrusted HFHSJCMC with personal information. Associates include but are not limited to staff, volunteers, donors, and participants in HFHSJCMC programs.

This requires that you respect the privacy rights of HFHSJCMC Associates, and create a level of trust so they can enjoy their relationship with the organization.

1. Partner Families:
  - a. Do not disclose the name and/or identity of HFHSJCMC program participants to anyone outside of the organization unless a release has been signed; and specific permission requested for each instance where personal information will be given to an outside entity.
  - b. Only discuss information regarding program participants to within the organization to authorized HFHSJCMC affiliates who have a direct need to know to progress a participants services within the organization.
  - c. Do not discuss or share information about HFHSJCMC program participants in public places.
2. All Associates:
  - a. Do not share an associate's confidential or identifying information to anyone not specifically authorized to have that information.
  - b. Handle inquiries from outside entities regarding all associates by referring them to the board president, committee chair or executive director.
  - c. Maintain all confidential Associate information in secure locked storage.

I understand these requirements, and agree to hold all confidential information obtained in the course of my service to Habitat for Humanity of St. Joseph County, Michigan in the strictest confidence and security. I will respect the right to privacy of all HFHSJCMC associates. I will not inappropriately disclose, discuss or mishandle any information regarding HFHSJCMC associates.

Printed Name \_\_\_\_\_

Signed \_\_\_\_\_

Dated \_\_\_\_\_

Let's Keep Building!

## **Policy 6: Construction Safety Procedure**

### **Policy**

It shall be the policy of Habitat for Humanity of St. Joseph County, Michigan, (HFHSJCMI) to comply with the following Construction safety requirements. This Construction Safety Procedure Policy for Habitat for Humanity of St. Joseph County, Michigan, constitutes safety training for staff and volunteers that work on a construction project. A daily safety briefing will also be conducted to remind workers of critical safety issues.

### **Guidelines For Safety**

1. Follow all safety instructions and consider these before starting your work or task.
2. If you are uncertain about how to do a task, or how to operate a power tool, ask a supervisor.
3. Concentrate on your task and eliminate distractions.
4. Know where the first aid kit is located and how to get emergency help.
5. Inspect all power tools, hand tools, ladders, and scaffolding on a daily basis.
6. Advise your supervisor immediately of any unsafe condition or hazard.

### **Proper Safety Equipment**

Proper clothing is essential. Wear clothes and gloves that are appropriate for the work and weather conditions. Loose clothing is dangerous around power tools.

Workers shall wear proper footwear at all times; must be close toed.

**Hard hats are to be worn while doing demolition work, during the framing phase of construction, or when required by a supervisor. Hard hats are to be made available to workers on each job site at all times.**

**Protective glasses will be issued to every construction worker. A worker must wear protective glasses any time he or she is operating a power tool or when instructed by a supervisor.**

Each worker must wear a dust mask when installing insulation, sanding or when instructed by a supervisor.

Ear plugs must be worn when using a power tool for a prolonged period of time or when instructed by a supervisor. Ear plugs are to be made available to workers on each job site at all times

### **Power Tools And Other Electrical Equipment**

A power tool should only be used after proper instruction is given on its use. The instruction will be given by a qualified person to all workers; even experienced do-it-yourselfers. The trainee should use the power tool in the presence of the instructor until the instructor is satisfied that the trainee knows how to use the power tool properly.

Never lower or carry a power tool by its cord. Clean tools daily. Power tools should be checked for defective switches, cords, plugs, and proper grounding. Defective tools should not be used and should either be reported to the supervisor and labeled or brought to the designated tool area for immediate repair. **(Do not wait until the end of the day.)**

In order to avoid electrical shock, the following rules must be obeyed:

1. A three pronged plug must be used on all electric power tools.
2. Extension cords must not have frayed insulation or be fastened with staples, hung from nails or suspended from wires.
3. All temporary lights must be equipped with non-conductive guards.

## **Hand Tools**

Always select the correct type and size of tool for your work. Make sure your tool is sharp and properly adjusted. Dull tools are hazardous to use because excessive force must be used to make them cut. Avoid using any tool if the handle is loose or in poor condition. Dirt or oil on a tool may cause it to slip, causing an injury. When using hand tools, hold them properly. Most edge tools should be held with both hands; cutting away from yourself. Avoid using your hand or fingers as a guide to start a cut. But, if it is necessary, use extreme caution.

Handle and carry tools with care. Keep edged and pointed tools turned downward. Carry only a few tools at one time, unless they are mounted in a special holder or carried in a tool belt. Anyone working with a hammer at any raised height should wear a hammer loop or tool belt, and, when not in use, the hammer should be kept in the loop or belt and not placed on a sloping surface or other precarious position. Do not carry sharp tools in your pockets. When not in use, tools should be kept in appropriate boxes, chests, or cabinets.

## **Saws**

1. Do not bind the blade of any saw. When cutting long panels, the blade may bind causing the saw mill to catch and kick back towards the operator. Use small wood wedges or shim shingles to spread the saw cut as you go.
2. Keep the blade guard working properly. A spring-actuated blade guard can often become bent and won't slide quickly or the spring can become stretched so the return is slow. Repair any damage to the guard as soon as it happens. Never tie the guard back out to the way.
3. Support what you are working on properly. Never attempt to cut something that could tilt or fall and cause the saw to slip.

## **Ladders**

Inspect a ladder before you use it. If the ladder is unsafe, don't use it. Look for wear and tear, loose rungs, and defects.

Use a ladder that will reach the work level. When using an extension ladder, extend it three feet above the work level and make sure to use the four to one rule. For every four feet of height, move the bottom of the ladder one foot away from the wall. If, while you are working, both of your shoulders are extended outside the ladder, you are reaching too far. Move your ladder with your work.

Place your ladder on solid footing. If there is danger of the ladder moving while your work, tie it down. If there is danger the ladder will be hit, barricade it.

Never use an aluminum ladder in the vicinity of electrical lines. Never use a ladder outdoors during inclement weather or on windy days.

Carry tools and materials properly, in appropriate containers, in order to keep your hands free for climbing. When climbing, always face the ladder.

## **Scaffolding**

**Only scaffolding that is pre-built or constructed by scaffolding professionals shall be used on all construction sites, unless inspected and approved by OSHA before use.**

All scaffolding which is elevated 10 feet or more must be equipped with a safety railing. All scaffolds must be equipped with a toe board to eliminate the possibility of tools or debris being kicked or dropped on people below. A scaffold must be designed to support four times the weight of the workers and the materials resting on it. Scaffolding components that are not designed to be compatible should not be used.

Inspect all scaffolding each day before using it. Never use damaged or defective equipment, and avoid rusted parts as their strength is unknown. When erecting scaffolding, provide adequate sills for the scaffold posts, and use base plates. Use adjusting screws, not blocks, when on an uneven grade. Make sure you plumb and level scaffolding and do not force end braces when constructing the scaffolding.

Many scaffolding accidents are caused by defective planking. Use only properly graded and inspected lumber for planking. Inspect planking daily for splits and knots, and remove defective or damaged planking.

## **Clean Work Site**

A clean work site is a safe work place. This refers to neatness and organization of the construction site. Maintaining good housekeeping contributes to the efficiency of the worker and is important in preventing accidents.

Position building materials and supplies in carefully laid out piles to allow adequate aisles and walkways. Clean up all rubbish and scrap materials on a daily basis. Do not permit blocks of wood, nails, bolts, empty cans, pipe, wire or other materials to accumulate on the work site. Such materials interfere with work and can constitute a hazard. Keep tools and equipment not in use in appropriate chests, panels, or tool boxes. This protects the tools and the workers. Never leave a work site unguarded unless all tools and materials have been properly secured.

## **Poisons And Toxic Substances**

The poison and toxic substances which can most often be found on a work site are asbestos, lead oxides, animal feces and solvents. Special care must be taken when you come in contact with any of these substances or any unfamiliar substance.

If you discover asbestos fiber used as pipe, boiler or heating duct insulation, contact your supervisor **immediately. DO NOT ATTEMPT TO REMOVE THE ASBESTOS FIBER ON YOUR OWN.**

Scraping exterior wood work, demolishing lead painted walls and stripping old mill work are principal ways in which workers can be exposed to lead chips, dust and particles. Contact your supervisor immediately if you discover any lead painted surfaces.

## **EMERGENCY MEDICAL CARE**

If someone is injured on the job, immediately Dial 911 and contact your site supervisor. Use the supplies located in the first aid kit to stabilize the injury as much as possible, until medical help arrives. Your supervisor is trained in first aid and will help with any injured worker.

# Construction Safety Procedure Policy

## ACKNOWLEDGEMENT FORM

I acknowledge that I, the undersigned, have received a copy of Habitat for Humanity of St. Joseph County, Michigan, Construction Safety Procedure Policy. I have read and reviewed the policy. I understand and agree to comply with the policy and will attend all required daily safety briefings.

Signature \_\_\_\_\_ DATE \_\_\_\_\_

Name of worker (please print) \_\_\_\_\_

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(269) 467-4663

