



517 1<sup>st</sup> ST NW  
 Mason City, IA 50401  
 Office 641-424-8978  
 FAX 641-424-8978  
 ReStore 641-423-1688  
[www.habitatnci.org](http://www.habitatnci.org)  
[habitatprograms@gmail.com](mailto:habitatprograms@gmail.com)

**VOLUNTEER INFO FORM (PRINT CLEARLY)**

Date:	Date of Birth:
Name:	
Street Address:	
City, ST, ZIP Code:	
Home Phone/cell phone:	
Work Phone:	
E-Mail Address:	

**Group information (Optional)**

Group Name:  I am the primary contact for this group

**Volunteer Task Preferences**

**Availability:**  Mon  Tues  Weds  Thurs  Fri  Sat  Mornings  Afternoons

Working at a jobsite  Office Volunteer  ReStore

Deconstruction Volunteer  Translators: Language  Volunteer Coordination

Family Selection Committee  Family Support  Construction Committee

Fundraising Committee  Marketing/Public Relations  Church Relations

**Person to Notify in Case of Emergency**

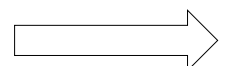
Name:	
Street Address:	
City, ST, ZIP Code:	
Home Phone:	
Work Phone:	
E-Mail Address:	

**Volunteer Frequency**

Are you a year-round resident?	Yes	No
What months are you local?	From	To

**Skills Assessment (please mark your preferred area of interest- put an X by your choice)**

ReStore	Skilled	Love to learn	I prefer NOT to do this
Volunteer in the ReStore			
Help pick up donations			
Sort donations			
Moving/loading items			
Cleaning donations/ReStore			



Skills Assessment (please mark your preferred area of interest- put an X by your choice)			
Construction	Skilled	Love to learn	I prefer NOT to do this
Forming & Pouring Concrete			
Framing-Interior & Exterior			
Rafters & Roofing			
Installing Doors & Windows			
Siding			
Insulation			
Hanging & Finishing Drywall			
Painting & Staining			
Finish Carpentry-Doors & Trim			
Installing Cabinets & Counters			
Installing Flooring			
Landscaping			
Final Cleaning/Move in Prep			
Construction supervision			
Site Host			
Provide Lunch/Snacks			

Skills Assessment (please make your preferred area of interest- put an X by your choice)			
Deconstruction	Skilled	Love to learn	I prefer NOT to do this
Deconstruction of items from house			
Loading/Unloading items			
Inventory list of items			
Helping to price items salvaged			

**Thank You**

Thank you for completing this volunteer form and for your interest in volunteering with Habitat for Humanity North Central Iowa. Please email this back to [habitatprograms@gmail.com](mailto:habitatprograms@gmail.com) or mail the hard copy to the address above.



## Authorization to Check Criminal Record

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I, \_\_\_\_\_ (name), hereby authorize Habitat for Humanity of North Central Iowa to obtain information pertaining to any convictions I may have had for federal and state criminal law violations. This information will include but not be limited to convictions for crimes committed while operating a vehicle, and handling money and will be gathered from any law-enforcement agency of this state or any state or federal government, to the extent permitted by state and federal law.

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

First Name \_\_\_\_\_ MI \_\_\_\_\_ Last \_\_\_\_\_

Social Security or Identification Number \_\_\_\_\_

Driver's License Number \_\_\_\_\_

State of Issuance \_\_\_\_\_ Expiration \_\_\_\_\_

DOB \_\_\_\_\_

Current Address \_\_\_\_\_

How long have you lived at this address? \_\_\_\_\_

What was your previous address? \_\_\_\_\_

What states have you lived in? \_\_\_\_\_

**IMPORTANT: ALL Habitat volunteers must have a signed Waiver of Liability form on file yearly. Please complete the following form if this is your first time on a jobsite this calendar year. PLEASE READ CAREFULLY! THIS IS A LEGAL DOCUMENT THAT AFFECTS YOUR LEGAL RIGHTS!**



## Release and Waiver of Liability

This Release and Waiver of Liability (the "Release") executed on this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by \_\_\_\_\_ (the "volunteer") in favor of Habitat for Humanity International, Inc., a nonprofit corporation, and Habitat for Humanity of North Central Iowa Inc., an Iowa 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 constructing and rehabilitating residential buildings, working in the Habitat offices, and living in housing provided for volunteers of Habitat.

The Volunteer hereby freely, voluntarily and without duress executes this 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 inequity, 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, personal 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, 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 site. Volunteer hereby expressly and specifically assumes the risk of injury or harm in the Activities and releases Habitat from all liability for injury, illness, death or property damage resulting from the Activities.
4. **Insurance.** The Volunteer understands that, except as otherwise agreed to 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 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, video or audio recordings made by Habitat during the Volunteer's Activities with Habitat, including, but not to, any royalties, proceeds or other benefits derived from such photographs and or recordings.
6. **Other.** Volunteer expressly agrees that this Release is intended to be as broad and inclusive as permitted by the laws of the State of Iowa, and that this Release shall be governed by and interpreted in accordance with the laws of the State of Iowa. Volunteer agrees that in the event that any clause or provision of this Release shall be held to be invalid 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 to be enforceable.

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

Name of Volunteer (please print): \_\_\_\_\_

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

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

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

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Parent or Guardian's Signature if under 18: \_\_\_\_\_

WITNESS: \_\_\_\_\_