



Alabama—West Florida Conference of the United Methodist Church

## Disaster Recovery Ministry

An UMCOR partner

6333 Piccadilly Square Drive  
Mobile, AL 36609  
866-340-1956 Toll Free  
251-340-1985 Local  
251-340-7363 Fax  
[www.awfumc.org](http://www.awfumc.org)  
disaster@awfumc.org

Dear Volunteer Team Leader,

Thank you for reaching out to help those who have been affected by Hurricane Ivan. We truly appreciate your generosity. In this packet you will find all the information you will need to volunteer your team to come and work in this disaster area.

Please read all the information in the packet carefully and distribute the appropriate forms to your team members. Return **ONLY** page one (Team Application) to the offices of the Disaster Recovery Ministry (DRM). You may e-mail it from the Forms page. You are responsible for collecting the other forms and having them handy on the worksite in case of an emergency.

The DRM office coordinates all the Hurricane Ivan disaster recovery efforts of the Alabama-West Florida Conference and is located in the Mobile District office building in Mobile, AL. When your team application is received our office will match up your team with a work project in the disaster area and pass your information to an on-site coordinator. The on-site coordinator will host your team and provide support and direction while you are in their area.

If you have further questions or require further assistance please contact us at the above numbers and addresses.

Sincerely,

Clyde F. Pressley, Jr.  
Executive Director

Helpful contact numbers and information:

Disaster Recovery Ministry

Ronald Baughman

Director of Volunteers

[Rbaughman@awfumc.org](mailto:Rbaughman@awfumc.org)

251-591-4443

Troy Vesper

Coordinator of Resources

[tvesper@awfumc.org](mailto:tvesper@awfumc.org)

251-591-7676

**Alabama-West Florida Conference Local Church Advance - #0110-22A**

(This is for donations to **Churches** that have had damage or destroyed due to Hurricane Ivan, UMCOR is not able to help financially with these costs.)

**UMCOR Advance 982410** (\*Please designate AWF Conference – Hurricane Ivan)



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Ron Baughman, Director of Volunteers  
[RBaughman@awfumc.org](mailto:RBaughman@awfumc.org)  
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## Group Volunteer Form

Date received: \_\_\_/\_\_\_/\_\_\_

Arrival date \_\_\_/\_\_\_/\_\_\_      Departure date \_\_\_/\_\_\_/\_\_\_

### Group Name

\_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Zip \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_      Cell: (\_\_\_\_) \_\_\_\_\_      Fax: (\_\_\_\_) \_\_\_\_\_

### Contact Name

\_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Zip \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_      Work: (\_\_\_\_) \_\_\_\_\_      Cell: (\_\_\_\_) \_\_\_\_\_

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

### Trip Details:

#### Team Members:

#\_\_\_ Adult Males  
#\_\_\_ Adult Females  
Youth Males  
#\_\_\_ ( Must be 16 years old)  
Youth Females  
#\_\_\_ ( Must be 16 years old)

#\_\_\_ Total in group

#### Housing Needs:

Require housing  
 Have camping trailers  
 Will secure own housing

#### Housing Assigned:

#### No. of Individuals with Skills:

#\_\_\_ Roofing  
#\_\_\_ Electrician  
#\_\_\_ Drywall  
#\_\_\_ H/VAC  
#\_\_\_ Carpenter  
#\_\_\_ Plumber  
#\_\_\_ Languages \_\_\_\_\_

#### Overall Team Skill Level:

General Use  
(Cleaning, painting)  
 Semi-skilled  
(Done Habitat, etc)  
 Skilled  
(Mostly Contractors)  
 Professional  
(Licensed Contractors)

### Special Requirements/Notes:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



## Individual Skills Survey Sheet

Team Leader \_\_\_\_\_

Church/Organization \_\_\_\_\_

Work Week \_\_\_\_\_

Name \_\_\_\_\_ Adult \_\_\_\_\_ Youth \_\_\_\_\_

Address \_\_\_\_\_

Phone (home) \_\_\_\_\_ (work) \_\_\_\_\_ (cell) \_\_\_\_\_

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

*Please use the terms below to describe your area and level of skill. Each person should fill out this form. The team leader should then return the forms to the above address as quickly as possible. The more information we have from you, the more effectively your talents can be used in the rebuilding effort. (example: Painter – B)*

### Construction Skill Areas

Window Installer \_\_\_\_\_  
Door Installer \_\_\_\_\_  
Electrician \_\_\_\_\_  
Engineer \_\_\_\_\_  
Painter \_\_\_\_\_  
Roofer \_\_\_\_\_  
Plumber \_\_\_\_\_  
General Contractor \_\_\_\_\_ (specify) \_\_\_\_\_  
Drywall \_\_\_\_\_ (hanging, finishing)  
Carpenter \_\_\_\_\_ (interior, framing, exterior)  
Mason \_\_\_\_\_ (tile setter, block layer, plasterer)  
Heating/AC \_\_\_\_\_  
Insulation \_\_\_\_\_  
Kitchen Cabinets \_\_\_\_\_  
General Helper \_\_\_\_\_  
Other \_\_\_\_\_ (specify) \_\_\_\_\_

### Construction Skill Levels

A – Willing Helper  
B – Do-It-Yourselfer  
C – Extensive handy person, no trade experience  
D – Worked trade previously  
E – Working trade currently as helper, etc.  
F – Licensed

### Human Service Skill Levels

Counseling \_\_\_\_\_  
Crisis Intervention \_\_\_\_\_  
Casework \_\_\_\_\_  
Program Planning \_\_\_\_\_  
Youth Work \_\_\_\_\_  
Elderly Outreach \_\_\_\_\_

### Human Service Skill Areas

A – Willing Helper  
B – Volunteer (specify areas, training, experience)  
C – Professional (specify training, education, employment)  
Other \_\_\_\_\_



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### **A Covenant for Success**

We are privileged to have the opportunity to serve our great God by being volunteers in missions. Our primary purpose as volunteers is to radiate the love of Jesus Christ. We are to invest ourselves in the mission and honor God in all we do.

We will need to be flexible, adaptable, sensitive, and patient. There will be times when we may want to hurry and get things done but delays happen. We will make the best of the quiet time to rest, get acquainted, and play with the children.

Cooperating is the key. We will need to cooperate with many, varied persons and conditions...Smile! A happy, positive attitude will go a long way, especially on hot, muggy days.

#### **On-Site Guidelines**

- No alcohol, drugs, or other illegal substances.
- Refer any changes, suggestions, or concerns to your leader.
- Work to acceptable standards. Do the best you can if not better!
- Ask questions if you don't know how or what to do next. Remember there is no such thing as a dumb question.
- Don't assume you know the entire building plan. Ask before you start a new project.
- Wear modest clothing – shoulders covered and loose fitting shorts that are long enough – sensible, safe shoes.
- Use sunscreen lotion or oil for outside work or play.
- Foul or undesirable language is not permitted.
- Keep workspace and living space neat and clean.
- Don't criticize, gossip, or start rumors.

**BE CAREFUL WHEN OUT AND ABOUT IN THE EVENING...USE THE  
BUDDY OR TRIAD SYSTEM.  
HAVE FUN AND SPREAD THE WORD!**



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### **Medical Information For Individual Volunteers**

(Every Volunteer Needs to Fill Out This Form)

Please complete the following and give it to your mission leader. The mission team leader should retain this form **ON SITE** to use in case of emergency.

Name \_\_\_\_\_

1. Blood type \_\_\_\_\_

2. Information about any prescriptions currently taking \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Allergies \_\_\_\_\_

4. Name of contact person \_\_\_\_\_

a. Street address \_\_\_\_\_

b. City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

c. Phone (work) \_\_\_\_\_ (home) \_\_\_\_\_

d. Relationship to volunteer \_\_\_\_\_

5. My health insurance company is \_\_\_\_\_

a. Policy number \_\_\_\_\_

6. Physical limitations or concerns \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7. I am diabetic \_\_\_\_\_ yes \_\_\_\_\_ no

8. I have a history of seizures \_\_\_\_\_ yes \_\_\_\_\_ no

9. Please provide other helpful health information \_\_\_\_\_  
\_\_\_\_\_

10. I consider myself healthy enough to fulfill my responsibilities on the mission team  
\_\_\_\_\_ yes \_\_\_\_\_ no

Signature of Volunteer \_\_\_\_\_



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## **PARTICIPANT LIABILITY RELEASE FORM**

*Please read before signing, as this constitutes the agreement as a volunteer and the understanding of your working relationship as a volunteer with The United Methodist Church Alabama-West Florida Conference Disaster Recovery Ministry.*

I, \_\_\_\_\_ acknowledge and state the following: I have chosen to travel to perform clean-up/construction work designed to repair disaster damage.

I understand that this work entails a risk of physical injury and often involves hard physical labor, heavy lifting and other strenuous activity; and that some activities may take place on ladders and building framing other than ground level. I certify that I am in good health and physically able to perform this type of work.

I understand that I am engaging in this project at my own risk. I understand that this is a "grass roots" activity to support individuals adversely affected by Hurricane/flood disaster or are receiving assistance to repair or replace substandard housing. I assume all risk and responsibility for any damage or injury to my property or any personal injury, which I may sustain while involved in this project, and related medical costs and expenses.

In the event that my supervising disaster organization arranges accommodations, I understand that they are not responsible or liable for my personal effects and property and that they will not provide lock up or security for any items. I will hold them harmless in the event of theft or for loss resulting from any source or cause. I further understand that I am to abide by whatever rules and regulations may be in effect for the accommodations at that time.

By my signature, for myself, my estate and my heirs, I release, discharge, indemnify and forever hold The United Methodist Church Alabama-West Florida Conference Disaster Recovery, together with their officers, agents, servants and employees, harmless from any and all causes of action arising from my participation in this project, and travel or lodging associated therewith, including any damages which may be caused by their negligence.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Dates of work team or dates covered by this liability form \_\_\_\_\_

Street address \_\_\_\_\_

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

Emergency Contact Name & Phone \_\_\_\_\_

Church or Organization Name \_\_\_\_\_

Witness \_\_\_\_\_



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**Medical Release Form For Minors**

Participant Information (Participant must be 16 years old)

Date/Destination of Trip \_\_\_\_\_

Team Leader \_\_\_\_\_

Minor's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Emergency Contact Name & Phone \_\_\_\_\_

Insurance Carrier \_\_\_\_\_ Policy Number \_\_\_\_\_

Allergies and Medications \_\_\_\_\_

Permission to give Tylenol (Yes/No) \_\_\_\_\_ Other medication (Be specific) \_\_\_\_\_

Describe Medical Conditions/Limitations \_\_\_\_\_

Signature of Minor \_\_\_\_\_ Date \_\_\_\_\_ Name of Guardian on Trip (need picture ID) \_\_\_\_\_

**PARENT OR GUARDIAN AUTHORIZATION**

I, \_\_\_\_\_, authorize \_\_\_\_\_  
 (Parent or Guardian) (Guardian on Trip)

to consent to any necessary examination, anesthetic, medical diagnosis, surgery, or treatment and/or hospital care rendered to the minor under the general supervision and on the advice of any physician or surgeon licensed to practice medicine by the state in which they practice, during the duration of the trip identified above.

\_\_\_\_\_  
 (Signature of Parent or Guardian) Date

**NOTARIZATION OF PARENT OR GUARDIAN AUTHORIZATION**

On this \_\_\_\_\_(day) of \_\_\_\_\_(year), Before me personally appeared \_\_\_\_\_ to me known to be the same person described in and who executed the within instrument, and who acknowledged the free act and deed thereof.

\_\_\_\_\_  
 Notary of Public

State of \_\_\_\_\_ County of \_\_\_\_\_

My commission expires \_\_\_\_\_



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## Liability Release Form for Youth Group Leaders

*Please read before signing, as this constitutes the agreement as a volunteer and the understanding of your working relationship as a volunteer with The United Methodist Church Alabama-West Florida Conference Disaster Recovery Ministry.*

I, \_\_\_\_\_ acknowledge and state the following:

I have chosen to travel to perform clean-up/construction work designed to repair disaster damage.

I understand that this work entails a risk of physical injury and often involves hard physical labor, heavy lifting and other strenuous activity; and that some activities may take place on ladders and building framing other than ground level. I certify that I am in good health and physically able to perform this type of work.

I understand that I am engaging in this project at my own risk. I understand that this is a "grass roots" activity to support individuals adversely affected by Hurricane/flood disaster or are receiving assistance to repair or replace substandard housing. I assume all risk and responsibility for any damage or injury to my property or any personal injury, which I may sustain while involved in this project, and related medical costs and expenses.

In the event of minors in my group, I certify that I have the appropriate parental release forms necessary to allow me to act in their behalf and, by my signature on the agreement, I certify that those in my care will be bound by the same terms and conditions. I understand that it is my responsibility and not of the supervising disaster agency to verify these items.

In the event that my supervising disaster organization arranges accommodations, I understand that they are not responsible or liable for my personal effects and property and that they will not provide lock up or security for any items. I will hold them harmless in the event of theft or for loss resulting from any source or cause. I further understand that I am to abide by whatever rules and regulations may be in effect for the accommodations at that time.

By my signature, for myself, my estate and my heirs, I release, discharge, indemnify and forever hold The United Methodist Church Alabama-West Florida Conference Disaster Response, together with their officers, agents, servants and employees, harmless from any and all causes of action arising from my participation in this project, and travel or lodging associated therewith, including any damages which may be caused by their negligence.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_

Emergency Contact Name & Phone \_\_\_\_\_

Witness \_\_\_\_\_



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### **Rebuilding Team's Supply List**

*Some supplies are available but may be limited. If your team members can bring items specific to the jobs they will be doing, they will be assured of having the tools when they are needed.*

#### **Tool List**

\*Nail Aprons  
\*Hammers  
Sledge Hammer  
\*Tape Measurers  
\*Drills & Bits  
Screw Guns  
Screw Drivers  
Sheetrock Screw  
Nails (all kinds)  
Levels  
\*Chalk Line & Chalk  
Crow Bars/Wonder Bars  
Speed Square  
\*Framing Square  
\*Skill Saw & Extra Blades  
Table Saw  
Chop Saw  
Hacksaw and Extra Blades  
Keyhole Saw  
\*Utility Knives  
Floor Scrapers  
Ladders  
\*Reciprocating Saw  
\*Cordless Drill  
Generator  
Pick Axe/Maul  
Roofing Shovel

#### **Other Items**

Brooms  
\*Dusk Masks – “NIOSH” approved and an N95 rating  
Knee Pads, if needed  
Pencils  
Mops  
\*Safety Goggles  
\*Work Gloves  
\*Latex Gloves  
Duct Tape  
Trash Bags  
Sunscreen/hats

#### **Painting Supplies**

Paint Rollers  
Roller Pans  
Paint Thinner  
Cotton Rags  
Masking Tape – 2 inches wide

#### **Electrical Supplies**

\*Extension Cords (heavy duty – 50' – 100')  
Drop Lights and Extra Light Bulbs  
Cordless Drill  
Electric Wire  
Black Electrical Tape

\*Please bring these items. Other items are optional or job-specific.



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### Volunteer Information

#### What You Need to Bring

Old Work Clothing (long pants)	Sleeping bag/twin sheets/pillow
Long Sleeved shirts/blouses	Water bottle/jug/cooler
Cotton & plastic work gloves	Changes of clothing for after work
Disposable face masks	First aid supplies (Band-aids, disinfectant)
Safety goggles (may be a team item)	Medical releases
Personal hygiene items	Use-of-equipment releases
Towels & washcloths	Name tags durable enough for the work site
Heavy work shoes/boots	Insect Repellant
Any personal hand tools you like using	Gel Hand Sanitizer
	Sunscreen

*Note: If your team is being housed in one of our refurbished homes, mobile homes, or churches, each person needs to bring his or her own twin sheets (and blanket if coming in the winter).*

#### Immediate Warehouse Needs

Wonderbars & Crowbars	Drywall Roto-Saw	Wire Hangers
Saw Horses	Drywall Square	Electrical Wiring
Wheelbarrows	Mud, Tape, Taping Knives	Electrical Tape
Cordless Drills/Drivers	Sheetrock Nails & Screws	Electrical Switches
½” Heavy Duty Drills	30 New or Used Folding Chairs	6ft stepladder
Insulation: R13 & R19 either 16” or 24” on Center		Levels

#### New Items Needed for Families in their Rebuilt/Repaired Homes

Electric or Gas Ranges	Water Heaters	Tea Kettles
Washers	Doors: Interior & Exterior	½ Gallon Pitchers
Dryers	Vinyl Flooring	Serving Bowls
Plumbing Supplies	Towel Racks	Pots & Pans
Kitchen Cabinets	Sets of Dishes	Frying Pans
Sinks	Sets of Flatware	Serving Platters
Blankets	Cookie Sheets	9”x13” Cake Pans
Bathroom Supplies (Tubs, Sinks, Toilets, Etc.)		Coffee Pots
Sets of Long-Handled Utensils		Glasses



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### **Checklist Two Weeks Before Departure**

- \_\_\_\_\_ 1. Have you collected the Liability Release Forms to be given to the person in charge at the worksite?
- \_\_\_\_\_ 2. Has each team member read the Covenant?
- \_\_\_\_\_ 3. Have you filled out the Medical Information Sheet to bring with you?
- \_\_\_\_\_ 4. Do you have Medical Releases for Minors to bring?
- \_\_\_\_\_ 6. Do team members have adequate clothing and tools?
- \_\_\_\_\_ 6. With youth (minimum age 16 years), do you have enough adults (1 adult per 4 or 5 youth)?
- \_\_\_\_\_ 7. Do you have a water jug and a first aid kit for each vehicle?
- \_\_\_\_\_ 8. Does someone at home know the emergency telephone number?
- \_\_\_\_\_ 9. Do you know how to get to your place of lodging?
- \_\_\_\_\_ 10. What is your time of arrival? Do you know whom to telephone about one/half hour ahead of arrival?
- \_\_\_\_\_ 11. Do you have adequate money for your trip-for gas, food, and emergencies?
- \_\_\_\_\_ 12. Have you made name tags to use on the work site?
- \_\_\_\_\_ 13. Have you prepared your team to be flexible to changes in work assignments, realizing that not all work is fun?
- \_\_\_\_\_ 14. If you are being housed in a church, home, mobile home, or other facility please consider making a donation to the facility to offset the cost of hosting you.
- \_\_\_\_\_ 15. Are you planning outings for which you need advance tickets? Have you ordered these?
- \_\_\_\_\_ 16. Are you preparing your team members to have broad expectations for the trip? Will they be a witness to Jesus Christ and recognize the people they meet as Children of God?
- \_\_\_\_\_ 17. Who is your construction supervisor? Have you planned how the team will be divided for work once the assignments are made?
- \_\_\_\_\_ 18. Have you asked a team member to be the photographer and another member to be the journalist?



## Evaluation

Name of Organization \_\_\_\_\_

Name of Team Leader \_\_\_\_\_

Regional Recovery Area Served \_\_\_\_\_ Dates Served \_\_\_\_\_

1. What motivated you or your team to become involved with this project?

2. Were your objectives for this mission met?

3. How was your reception when you arrived to work?

4. Did you have adequate advance information about the project?

5. Did you get an adequate orientation to your work site?

6. Did you complete today's/the week's task? \_\_\_\_\_ yes \_\_\_\_\_ no

7. If no, what is left?

8. Was special equipment available if needed? If no, what was needed?

9. Did you have any problems? \_\_\_\_\_ yes \_\_\_\_\_ no

10. If yes, what were they and how can we improve on the situation?

11. Did you have adequate housing? \_\_\_\_\_ yes \_\_\_\_\_ no

12. What could we do to improve your team's or another team's experience with us?

13. Please comment on the following:

A. Debriefing:

B. The most important part of the week was:

C. Additional comments which you believe will be helpful to us:



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### Homeowner Release of Liability

*This is to be filled out on site by the homeowner **BEFORE** any of the volunteers do **ANY** work on the house.*

DATE: \_\_\_\_\_ DAYTIME PHONE: \_\_\_\_\_ NIGHT PHONE: \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

I, \_\_\_\_\_, am the owner and occupant of the above listed property. I give permission to volunteers from the Alabama-West Florida Conference of the United Methodist Church Disaster Recovery Ministry to work on my property for the purpose of repairing my home due to the recent disaster. I understand that these are volunteers, not professionals working for profit, and that no warrant is made as to the quality of work done.

In consideration of the volunteer services to be rendered to me or on my property by the volunteers, I the undersigned release and agree to hold harmless the volunteers, Alabama-West Conference of the United Methodist Church, and any related agency, from any liability, injury, damages, loss, accident, delay or irregularity related to the aforementioned volunteer services.

This release covers all rights and causes of action of every kind, nature, and description, which the undersigned ever had, now has, or but for this release, may have. This release binds the undersigned and his heirs, representatives, and assignees.

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