



Volunteer Registration Form

Are you: Individual Volunteer
 With A Mission Team - If yes, what is their name? Presbyterian Church of Chatham Township

Name:	Date of Birth:
Address:	City, State, Zip:
Mobile:	Email:

Medical Information and Release

Coverage: I certify that I have sufficient health, accident and liability insurance or other benefits to cover any bodily injury or property damage I may incur while participating in a Carolina Rebuilding Ministry Project and to cover bodily injury or property damage caused to a third party as a result of my participation in a Carolina Rebuilding Ministry Project, as follows:

Company _____

Policy No. _____

Company's Address _____

Person to be notified in case of emergency

Name: _____ Relationship: _____

Phone: _____ Is this a Mobile or Landline? Please circle one.

Alternate Contact: _____ Relationship: _____

Phone: _____ Is this a Mobile or Landline? Please circle one.

Photo Use

I give my permission for pictures/digital images of me may be taken during the mission. Yes No

Christian Conduct

I understand that team members must be flexible, cooperative, and cheerful. I agree to cooperate with the team leader, team members, and the host agency concerning daily assignments, food, lodging, and transportation. I agree to stay with the team from beginning to end and to conduct myself in an appropriate Christian manner.

Liability Release Form

I understand that I am about to embark on travel into circumstances with unknown personal safety and/or sanitary conditions. I understand there is an inherent risk in the activity I am undertaking. Therefore, I agree to release and hold harmless Carolina Rebuilding Ministry and its member churches, the mission site leaders, the host agency, the North Carolina Conference of the United Methodist Church, and any related agency, general church agency, conference, district, local church, member, employee or agent from any liability for personal injury, damages, loss, accidents, and/or delays resulting from my participation. This release is given in consideration of Carolina Rebuilding Ministry efforts in making arrangements for my participation. This release is intended to bind me, my heirs, and personal representatives.

If the participant is under 18 years of age: 1) parent/guardian must also sign this form and 2) complete the parental permission section below.

By signing below, I confirm that I agree to comply with all the above.

Signature of Participant _____ Date _____

Parent/Guardian (if under 18) _____ Date _____

Witness _____ Date _____

Parental Permission

I, _____ parent/guardian of _____ do hereby give permission for him/her to:

- Use Power Tools
- Be on roof
- Forbidden to use power tools or be on roof

Skills and Experience

Please rate yourself based on your skills and experience with making repairs to homes. (Circle One)

1. Amateur – Needs guidance but has will to learn, little to no experience.
2. Novice – limited experience, but have some knowledge of repair work.
3. Experienced, can work independently but may have some questions.
4. Advanced, can work independently.
5. Professional, can work independently and instruct others; licensed where applicable.

If you circled 3, 4, or 5, please tell us what type of experience you have: (carpentry, drywall, etc.)

This registration form must be completed in its entirety to participate.

We look forward to serving with you!

