

**VOLUNTEER REGISTRATION**  
**HABITAT FOR HUMANITY OF EAST POLK COUNTY, INC.**  
**3550 RECKER HIGHWAY, WINTER HAVEN, FL 33880**  
**Phone: 863-292-2256    FAX: 863-292-2257**

**Please Print, Sign, Date and Return**

Volunteer's Name: \_\_\_\_\_

Florida Mailing Address \_\_\_\_\_ City/State \_\_\_\_\_

Zip \_\_\_\_\_ Phone (863) \_\_\_\_\_ E-Mail \_\_\_\_\_

Present/Former Occupation \_\_\_\_\_ Hobbies/Skills \_\_\_\_\_

I AM  18 years or older  younger than 18\*  I would appreciate NOT being called for volunteer opportunities

I AM  High School community service volunteer,  Court ordered community service volunteer hours  
 Polk One-Stop service volunteer

I AM AVAILABLE:  Monday  Tuesday  Wednesday  Thursday  Friday  Saturday  YEAR ROUND  
**OR**  Jan  Feb  Mar  Apr  May  June  July  Aug  Sep  Oct  Nov  Dec

I CAN WORK BETWEEN THE HOURS OF : \_\_\_\_\_

I WOULD LIKE TO VOLUNTEER FOR  The ReStore  Construction  Clerical  Publicity  Fund Raising  
 Family Selection  Family Nurture  Church Relations

Other: \_\_\_\_\_

**I have read, understand and agree to the terms of the release and waiver statement below.**

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

**If a Minor, Parent/Guardian's Signature:** \_\_\_\_\_ Date: \_\_\_\_\_

**\*Habitat Policy: A Minor (under the age of 18 years) (1) must be accompanied and supervised by a parent or legal guardian at the construction site, (2) cannot get on a ladder and (3) is not allowed to use electrical power tools.**

The above named Volunteer, and if a Minor, the Legal Guardian of the above named Volunteer, by his/her signature, does hereby freely, voluntarily and without duress release and forever discharge, waive and hold harmless Habitat for Humanity International, a non-profit organization, and Habitat for Humanity of East Polk County, Inc., a Florida non-profit corporation, their directors, officers, employees and other agents from any and all liability, claims and demands of whatever nature, either in law or in equity, with respect to any bodily injury or personal injury, illness, death or property damage which may hereafter arise from the Volunteer's activities with Habitat, whether caused by the negligence of Habitat or its officers, directors, employees, agents or otherwise, working at a Habitat construction site, in Habitat's office facilities and shop, in the ReStore, being transported in a Habitat vehicle, or living in housing provided by Habitat volunteers. The Volunteer and Guardian also understand that Habitat assumes no 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 and in fact **does not carry or maintain health, medical or disability insurance for any Volunteer.** The Volunteer and Guardian do hereby release and forever discharge Habitat from any claim whatsoever which may hereafter arise on account of any first aid, treatment or service rendered in connection with the Volunteer's activities with Habitat or with the decision by any representative or agent of Habitat to exercise the power of consent to medical or dental treatment. The Volunteer and Guardian hereby expressly and specifically assume the risk of injury or harm in the activities of Habitat and releases Habitat from all liabilities.

The Volunteer and Guardian do hereby grant and convey to Habitat all right, title, and interest in any photographic images and video and 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 photos or recordings.

Each Volunteer is expected and encouraged to obtain his or her own medical, health and injury insurance and to wear appropriate protective clothing, including gloves and eye protection.  
Habitat assumes no responsibility for damage to or loss of a Volunteer's personal tools.

**Habitat for Humanity of East Polk County**

**Please Answer The Following Questions**

Do you have any disability or injury that prevents you from lifting material?

Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, explain condition:

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If no, what is the maximum you can lift? \_\_\_\_\_

Are you allergic to any medication? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, list medication: \_\_\_\_\_

Please list person to notify in case of emergency:

Name: \_\_\_\_\_

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

Relationship: \_\_\_\_\_

**CONSTRUCTION SITE AND RESTORE DRESS CODE**

1. Closed-toe/heel shoes **ONLY!** (Tennis shoes are okay.)  
\*\*\* **NO** sandals, flip-flops, clogs, or open toe/heel shoes of any kind!
2. Jeans, shorts  
\*\*\* **NO** short-shorts and **NO** underwear showing!
3. Sleeveless shirts, T-shirts  
\*\*\* **NO** thin-strapped tank tops or muscle shirts or shirts with writing that might be considered offensive!
4. **NO** midriff section is to show!

**ReStore Volunteers:** Please be aware there are hazardous materials present as merchandise for sale. You will be instructed on safe handling procedures. Notify management ASAP in the case of spills or accidents.

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