

REBUILDING TOGETHER®
Madison County Inc.

Please return form to:
Rebuilding Together®
Madison County Inc.
1101 Greenwood St.
Madison, IL. 62060

VOLUNTEER SIGN UP FOR 2009 PROJECTS

YES I would like to participate in Rebuilding Together Madison County Inc. projects on Saturday April 25, 2009.
From 8:00 am – 5:00 pm or until work is done.

I am volunteering with my employer or group: **Yes** _____ **NO** _____
I am volunteering as an individual. (You will be assigned to a home where
Additional volunteers are needed.) **Yes** _____ **NO** _____

As a community volunteer, I understand that you will provide me with my assignment(s) and further details by mid-April. If possible:

I would like to be assigned to a site in (city) _____
I would like to be assigned with House Captain: _____
I have no preference regarding site assignment _____

PLEASE PRINT:

Name: _____ Home Phone: _____
Work Phone: _____
Home Address: _____
City: _____
E-Mail Address: _____

Employer or group volunteering with: _____

Please check skill you could offer on April 25, 2009:

Carpenter ___ Craftsman ___ Semi-Skilled ___ Some Experience ___ No Experience
Electrician ___ Craftsman ___ Semi-Skilled ___ Some Experience ___ No Experience
Heat/AC ___ Craftsman ___ Semi-Skilled ___ Some Experience ___ No Experience
Plumber ___ Craftsman ___ Semi-Skilled ___ Some Experience ___ No Experience
Roofer ___ Craftsman ___ Semi-Skilled ___ Some Experience ___ No Experience
Painting ___ Craftsman ___ Semi-Skilled ___ Some Experience ___ No Experience
House Captain: Experienced ___ No Experience ___
Video/Photo: Experienced ___ No Experience ___

I would like to volunteer for a Rebuilding Together® Madison County Inc. Committee **YES** _____ **NO** _____
I would like to volunteer to work Rebuilding Together® Madison County Inc. fund-raisers **YES** _____ **NO** _____

Complete and return this form to the above address before **March 13, 2009** to guarantee placement.

**** Waiver on reverse side must be signed for all volunteers. Volunteers under 18 years of age must have Parental Permission Waiver signed.**

REBUILDING TOGETHER® MADISON COUNTY INC.
WAIVER OF LIABILITY
Home Repair Project

In consideration of the opportunity afforded me to assist on a voluntary basis in the Rebuilding Together® Madison County Inc. Home Repair Project (a project in which homes of disadvantaged persons will be repaired by volunteers) and in light of the aims and purposes of the community service provided by Rebuilding Together® Madison County Inc. in organizing this project, I hereby waive any right or cause of action arising as a result of my participation in said project from which any liability may or could accrue against Rebuilding Together® Madison County Inc. or its officers and directors collectively or individually. Without limiting the generality of the foregoing, I agree that this waiver shall include any rights or causes of action resulting from personal injury to me or damage to my property sustained in connection with my activities for the Home Repair Project. I consent to the unrestricted use of my image, in connection with the Project, by Rebuilding Together® Madison County Inc. or any person authorized by Rebuilding Together® Madison County Inc., including but not limited to, any photographs, audio or video recordings, interviews, videotapes, or the use of my name in connection with television, radio or print media.

Date: _____ VOLUNTEER: _____

WITNESS: _____

In case of emergency, please contact:

NAME: _____

RELATIONSHIP: _____ PHONE #: _____

REBUILDING TOGETHER® MADISON COUNTY INC.
PARENTAL PERMISSION
Home Repair Project

In consideration of the opportunity afforded my child to assist on a voluntary basis in the Rebuilding Together® Madison County Inc. Home Repair Project (a project in which the homes of disadvantaged persons will be repaired by volunteers) and in light of the aims and purposes of the community service provided by Rebuilding Together® Madison County Inc. in organizing this project, I(we) give my (our) permission for my(our) child to participate in the Home Repair Project, and I(we), on behalf of my(our) child and myself(ourselves), waive any right or cause of action arising as a result of my(our) child's participation in said project from which any liability may or could accrue against Rebuilding Together® Madison County Inc. or its officers and directors collectively or individually. Without limiting the generality of the foregoing, I(we) on behalf of my(our) child and myself(ourselves), agree that this waiver shall include any rights or causes of action resulting from personal injury to my(our) child or damage to my(our) child's property sustained in connection with my(our) child's activities from the Home Repair Project.

Date Signed: _____ Child's age: _____

Parent: _____ Parent: _____

In case of emergency, please contact:

NAME: _____

RELATIONSHIP: _____ PHONE #: _____

