



2010 Macomb County Habitat for Humanity



Thank you for choosing to volunteer with Macomb County Habitat for Humanity. We're looking forward to working with you, and we're glad you are joining us in our mission to make home ownership possible with motivated families in Macomb County. Before you begin, please take a moment to read the following "Release" form carefully. By signing this release, you will be helping us stay focused on our mission and create a safe working environment for everyone. If you have any questions, please see your site supervisor or give us a call at our office, 586-263-1540. Thanks again for your partnership!

Release & Waiver of Liability

Please read carefully and sign below:

I hereby release Macomb County Habitat for Humanity, and any of its affiliates or associations, including all of its agents, employees, directors, officers and workers from any claims, demands, suits, or causes of action against it which I and my heirs or personal representatives have or may have in the future in regard to any accidents, injuries, or damages to me or my property arising from any work performed with Macomb County Habitat for Humanity. I understand that I am a volunteer working on this project and as such I assume all risk of injury, harm, illness, death, or property damage associated with my volunteer activities and I waive all rights to claims, demands, suits, or causes of action for injuries or damages sustained in relation to my volunteer activities with Macomb County Habitat for Humanity.

I also understand that Macomb County Habitat for Humanity does carry emergency accident insurance coverage for volunteers, and that this insurance only covers eligible costs beyond my personal health insurance coverage. In case of injury I agree to notify the Macomb County Habitat for Humanity site supervisor immediately. However, I understand that all volunteers are expected and encouraged to arrive with medical or health insurance coverage in effect. Furthermore, I agree to carefully follow all safety guidelines and procedures, as given and requested by the site supervisors.

I do hereby grant and convey to Macomb County Habitat for Humanity all right, title and interest in any and all photographic images and video or audio recordings made by Macomb County Habitat for Humanity during the home building and other volunteer activities, including, but not limited to, any royalties, proceeds, or other benefits derived from such photographs or recordings. I further state that I have carefully read the foregoing release, know its contents and sign as my own free act.

PLEASE FILL IN COMPLETELY AND LEGIBLY

SIGNATURE _____	DATE _____
PRINT NAME _____	
Telephone _____	Email _____
Address _____	City _____ Zip _____
I am a Lutheran <input type="checkbox"/>	I am a Thrivent Member <input type="checkbox"/>
I am a member of the following Church or Group _____	

EMERGENCY Name & Phone Number _____
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FOR MINORS ONLY
Parent's Signature required if between 14-17 _____
PRINT NAME _____ DATE: _____

For any questions please contact our Volunteer Coordinator
Ph: 586-263-1540 Fax: 586-468-2360 E-mail: volunteer@macombhabitat.org

THANK YOU!