P.O. Box 15052
New Orleans, LA 70175
Phone (504) 861-2077
Fax (504) 866-6004
www.habitat-nola.org

VOLUNTEER PROFILE AND WAIVER FORM

Thank you for choosing to volunteer with New Orleans Area Habitat for Humanity (NOAHH). Please take a moment to fill out this form. Please mail or fax completed forms to NOAHH. You may also bring completed forms to the worksite with you on your first day of volunteering. Thank you once again for your interest, and welcome to Habitat!

NOAHH will not share this information with any third party.

PLEASE PRINT

NAME:_____ **DATE:**_____

STREET:_____

CITY:_____ **STATE:**_____ **ZIP:**_____

DAYTIME PHONE:_____**EVENING PHONE:**_____

FAX:_____**E-MAIL:**_____

EMPLOYER/SCHOOL/ORGANIZATION:

_____

WAIVER OF LIABILITY

I understand that my or my dependent's work as a volunteer on or about a Habitat construction site or project could expose me or my dependent to various risks of injury or illness. I understand and assume these risks, and agree not to hold New Orleans Area Habitat for Humanity, Inc. (NOAHH), its agents, employees, volunteers, or volunteer homeowners liable for such injury or illness. I further understand that it is the policy of NOAHH that all volunteers or visitors must abide by the verbal safety instructions and requirements of NOAAH staff that are outlined on the construction site.

_____ _____ _____
Volunteer's Printed Name Signature Date

_____ _____
Signature of parent/guardian if volunteer is under 18 years of age Date

___ Checking this line serves as my signature to this waiver of liability