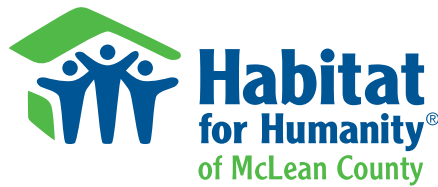


Please bring this document with you to the work site for check-in.



For Office Use Only

Date Received: _____

Date Entered: _____

Volunteer Release and Waiver of Liability

Please Read carefully! This is a legal document that affects your legal rights!

This Release and Waiver of Liability (the "Release") executed on _____, 20____ by

_____ (the "Volunteer"), and, if the "Volunteer" is a minor or under legal disability, also
(print name)

by, _____, the parent having legal custody or legal guardianship of the "Volunteer"
(print name)

(the "Responsible Party") who, by signing this Release shall make each of the declarations of the Volunteer on his or her own behalf as the Responsible Party and on behalf of the Volunteer, in favor of Habitat for Humanity International, Inc., a nonprofit corporation, and Habitat for Humanity of McLean County Inc., an Illinois nonprofit corporation, their directors, officers, employees, and agents (collectively, "Habitat").

The Volunteer desires to work as a volunteer for Habitat and engage in the activities related to being a volunteer (the "Activities"). The Volunteer understands that the Activities may include constructing, deconstructing, & rehabilitating buildings, working in the Habitat offices, resale store, & warehouses, and working at special events.

The Volunteer hereby freely, voluntarily, and without duress executes this Release under the following terms:

Release and Waiver: Volunteer does hereby release and forever discharge and hold harmless Habitat and its successors and assigns from any and all liability, claims, and demands of whatever kind of nature, either in law or in equity, which arise or may hereafter arise from Volunteer's Activities with Habitat.

Volunteer understands that this Release discharges Habitat from any liability or claim that the Volunteer may have against Habitat with respect to any bodily injury, personal injury, illness, death, or property damage that may result from Volunteer's Activities with Habitat, whether caused by the negligence of Habitat or its officers, directors, employees, or agents or otherwise. Volunteer also understands that Habitat does not assume any responsibility for or obligation to provide financial assistance or other assistance, including but not limited to medical, health, disability or worker's compensation insurance in the event of injury or illness.

It is the policy of Habitat that individuals under the age of 14 not be allowed on a Habitat work site while there is construction in progress. Federal regulations prohibit individuals between the ages of 14 and 15 from working in general construction. They may, however, engage in limited activities such as clearing lots, landscaping, or painting. Individuals between the ages of 16 and 17 may perform general construction work, but may not engage in certain activities that are considered ultra hazardous. These activities include the use of power tools and motor vehicles, demolition, roofing, and excavation operation. Individuals 18 years of age and older are considered to be adults.

Medical Treatment: Volunteer does hereby release and forever discharge Habitat from any claim whatsoever which arises or may hereafter arise on account of any first aid, treatment, or service rendered in connection with the Volunteer's Activities with Habitat.

Assumption of the Risk: The Volunteer understands that the Activities include work that may be hazardous to the Volunteer, including, but not limited to, construction, loading and unloading, and transportation to and from the work sites. Volunteer hereby expressly and specifically assumes the risk of injury or harm in the Activities and releases Habitat from all liability for injury, illness, death, or property damage resulting from the Activities.

Insurance: The Volunteer understands that, except as otherwise agreed to by Habitat in writing; Habitat does not carry or maintain health, medical, disability or worker's compensation insurance coverage for any Volunteer. Habitat does, however, provide GAP insurance to all Volunteers under its medical insurance. This means that in the event that medical attention is sought, the Volunteer and/or Guardian's primary medical insurance pays first. Habitat's medical insurance would only pay as secondary coverage or in the case that the Volunteer does not have any medical insurance. Each Volunteer is expected and encouraged to obtain his or her own medical or health insurance coverage.

Photographic Release: Volunteer does hereby grant and convey unto Habitat all right, title and interest in any and all photographic images and video or 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 photographs or recordings.

Other: Volunteer expressly agrees that this Release is intended to be as broad and inclusive as permitted by the laws of the State of Illinois, and that this Release shall be governed by and interpreted in accordance with the laws of the State of Illinois. Volunteer agrees that in the event that any clause or provision of this Release shall be held to be invalid by any court of competent jurisdiction, the invalidity of such clause or provision shall not otherwise affect the remaining provisions of this Release which shall continue to be enforceable.

By signing below, the Volunteer and, if applicable, the parent/guardian, has read, understood, and executed this Release as of the date first above written.

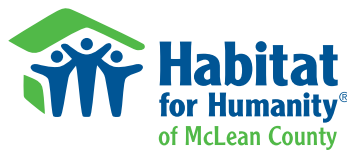
Volunteer Signature: _____

Date: _____

Parent/Guardian (if applicable): _____

Date: _____

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Construction Volunteer Information Form

Volunteer Information

Name: _____

Date of Birth: _____

Address: _____

Telephone: _____

City, State, Zip Code: _____

Email: _____

Would you like to be added to our mailing list? Yes _____ No _____

If yes, would you prefer receiving our newsletter electronically? Yes _____ No _____

Please check one:

- ▶ Individual Volunteer
- ▶ House Team: _____
- ▶ School Affiliation: _____

Emergency Contact Information

Name: _____

Telephone: _____

Alternate Telephone: _____

Are you 18 yrs or older? Yes No

What is your experience level? (circle one) novice skilled professional

If you circled "professional", what is your trade? _____

Who is your employer? _____

Are you aware of a volunteer incentive program through your employer? Yes No

Please share any other information you feel would be helpful to Habitat:
