

2900 Elysian Fields Ave. New Orleans, LA 70122 Phone (504) 861-2077 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 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:	VOLUI	NTEER DATE(S)	Volunteer Dates April 7-10, 202
		(4)	-
STREET:CITY:	S	TATE:	ZIP:
DAYTIME PHONE:	EVEN.	NG PHONE:	
DAYTIME PHONE:EN	MAIL:		
VOLUNTEER GROUP NAME:			
Check if you are a member of		A spring break group	
I understand my or my dependent's site or project could expose me or understand and assume these risks, Humanity, Inc. (NOAHH), its ager for such injury or illness. I further volunteers or visitors must abide by NOAAH staff that are outlined on and any other likeness of me taken appropriate uses promoting the mis receive any pay or other reward for	my dependent to var , and agree not to ho nts, employees, volu- understand that it is y the verbal safety in the construction site during volunteer ev- ssion of New Orlean r the use of my liken	rious risks of injurald New Orleans Anteers, or voluntee the policy of NOAnstructions and record I permit NOAHI ents for fundraising Area Habitat for ess, voice, or pict	ry or illness. I Area Habitat for er homeowners liable AHH that all quirements of H to use photos, video, ng, publicity, or other r Humanity. I will not ure.
Volunteer's Printed Name	Signatu	re	Date
Signature of parent/guardian if volunte	eer is under 18 years o	f age Date	