

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: ______ VOLUNTEER DATE(S):_____

STREET:			
CITY:	STATE:ZIP:		
DAYTIME PHONE:	EVENING PHONE:EMAIL:		
FAX: E	MAIL:		
VOLUNTEER GROUP NAME: _			
Check if you are a member of	RHINO	A sprii	ng break group
I understand my or my dependent site or project could expose me or understand and assume these risks Humanity, Inc. (NOAHH), its age for such injury or illness. I further volunteers or visitors must abide to NOAAH staff that are outlined on and any other likeness of me taken appropriate uses promoting the mirreceive any pay or other reward for	my dependent to varies, and agree not to ho ents, employees, volu- cunderstand that it is by the verbal safety in the construction site in during volunteer ev- ission of New Orlean	rious risks of a ld New Orlea nteers, or voluthe policy of a structions and a linear I permit NC rents for fundates Area Habita	injury or illness. I ans Area Habitat for unteer homeowners liable NOAHH that all ad requirements of OAHH to use photos, video, raising, publicity, or other at for Humanity. I will not
Volunteer's Printed Name	Signatu	ire	Date
Signature of parent/guardian if volun	teer is under 18 years of	of age Date	