

Volunteer Form

Habitat for Humanity of Northwest Arkansas

(Please fill out each section legibly and completely)

**** Personal Information (must be completed)**

Date: _____

Name: _____ (Last, First) (Nickname) _____

Address: _____

(Street)

(City)

(State)

(Zip)

Telephone Numbers: (Cell) _____

(Home) _____ (Work) _____

Email: _____ Preferred form of

contact ☐ Email ☐ Phone ☐ Text

(PLEASE PRINT CLEARLY)

Volunteering with a Group:

(Please list the organization, business or group with whom you are volunteering)

This is to complete Court Ordered or Student Service Learning community service hour (if so please complete following)

Court or School name: _____ # Hrs Needed: _____

**** Medical Restrictions (must be completed):**

Please list any allergies, illnesses or physical restrictions we need to be aware of while you are volunteering: _____

Date of last tetanus shot: _____

Volunteer Information: You may register for shifts online at GivePulse (www.givepulse.com) and search for Habitat for Humanity of Northwest Arkansas and register for an event.

Please check next to the area(s) you are interested in volunteering

SALES VOLUNTEER

☐ I am comfortable moving/lifting medium/large size items

☐ I have customer service experience/skills

☐ I have operated a simple cash register before

☐ I have knowledge of basic home repair/building materials

☐ I have volunteered in a Habitat ReStore before

(location: _____)

DONATION PICK-UP VOLUNTEER

☐ I am comfortable moving/lifting large items

Volunteer/Community Service Worker Expectations

Sign and return with Volunteer Form

- You must wear close-toed shoes with adequate grip (no sandals, flip-flops, ballet flats, or crocs).
- Face masks must be worn at all times.
- **Sign in and out at the information board at the beginning and end of your shift.** For those who need time verification, keep in mind that if you do not sign out at the end of your shift, you **WILL NOT** receive credit for those hours.
- **If you miss excessive scheduled shifts without contacting the manager or supervisor on duty prior to or at the time of your shift, you will not be allowed to return.**
- Absolutely NO explicit language or conversations.
- Do not run through the store.
- Do not wear torn or offensive clothing, including t-shirts/hats with offensive phrases or graphics, short shorts, tank tops, tight or provocative clothing (showing your midriff or under garments).
- Complete tasks given to you by employees or listed on white board (please do not erase) in an efficient manner.
- Notify an employee when taking a break or going to lunch.
 - All volunteers are allowed a 15 minute break (sign out not necessary) for every 4 hours of work and a 30 minute lunch (write time for lunch next to name) for 6 hours of work or more.
- If you are driving, please be sure to park closer to the back of the lot (past the A/C unit) to ensure customers have available spots.
- **Please refrain from using cell phones or personal electronic devices during your shift. Headphones of any kind are not allowed. Violators will be dismissed.**
- **Never put a product on the floor without a price.** In the event you find an item on the floor without a price, use the pricing guide (located at front, mid-store, and back receiving desks) or contact an employee for a price. **NEVER** give a customer a price without contacting an employee.
- Discounts are based on our dotting system. No other discounts are allowed, NO EXCEPTIONS.
- Please do not rearrange displays without direct instruction from an employee. This does not pertain to straightening and organizing current arrangements.
- Volunteers, community service workers, employees and partner families may not purchase an item that has been brought in until it has been priced and available to the public for a full 24 hours. No exceptions. Violators will be asked to leave immediately.
Please refer to the store policies for more information that you will need to know in order to assist customers.

I understand that if any of the above rules are broken, at the Manager or Supervisor's discretion, I may be asked to leave immediately, and that I may not be allowed to return. I also understand that I can be asked to leave for any other issue that management deems unacceptable.

Signature _____ Date _____

Volunteer/Community Service Worker Expectations

Habitat ReStore of Fayetteville Arkansas

- You must wear close-toed shoes with adequate grip (no sandals, flip-flops, ballet flats, or crocs).
- Face masks must be worn at all times.
- **Sign in and out at the information board at the beginning and end of your shift.** For those who need time verification, keep in mind that if you do not sign out at the end of your shift, you **WILL NOT** receive credit for those hours.
- **If you miss excessive scheduled shifts without contacting the manager or supervisor on duty prior to or at the time of your shift, you will not be allowed to return.**
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Please refer to the store policies for more information that you will need to know in order to assist customers.

***Keep this copy for your records**

Habitat for Humanity of Northwest Arkansas - 1421 E. 15th St., Fayetteville, AR 72701
ReStore Phone: 479-582-2076 Office phone: 479-575-9696
website: www.habitatnwa.org

[1] Each Habitat for Humanity affiliate is an independently owned and operated non-profit corporation. Habitat for Humanity International, Inc. does not own, operate, or control the activities of Habitat for Humanity affiliated organizations.

Volunteer Agreement, 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") is executed on this day of _____, 20____, by _____, (the "Volunteer"), in favor of Habitat ReStore of Fayetteville [insert name of local affiliate or national organization], Habitat for Humanity International, Inc. and any other Habitat for Humanity affiliated organization¹, Habitat for Humanity of Northwest Arkansas [insert any additional parties if applicable, such as sponsors/donors] and their respective affiliates, directors, officers, trustees, employees, sponsors, donors, volunteers and agents (collectively, the "Released Parties").

I, the Volunteer, desire to work as a volunteer for one or more of the Released Parties without compensation and engage in the activities related to being a volunteer. I understand that my activities may include but are not limited to the following: working at Habitat for Humanity offices and worksites; working in or for Habitat for Humanity ReStore operations; loading and unloading materials; traveling to and from work sites, towns, cities or countries; consuming food available or provided; living in housing provided for volunteers; assisting in disaster relief areas; constructing, repairing, and rehabilitating residential buildings; other construction-related activities; and other in-person and/or online volunteer activities ("Activities").

I, the Volunteer, understand that my Activities may include work that may be hazardous to me, including, but not limited to, exposure to lead, asbestos and mold, which may cause or worsen certain illnesses, especially if I do not wear protective equipment, am exposed for extended periods of time, or have a pre-existing immune system deficiency.

I also understand there is some inherent risk in consuming local foods and living in local accommodations in the city(ies) or country(ies) visited. I further understand I may be traveling to and from locations where there is a risk of terrorism, war, insurrection, criminal activities, instability, inclement weather or other circumstances that could threaten my health or safety. I also understand that it is the policy of the Released Parties not to pay ransom or make any other payments to secure the release of hostages.

I, the Volunteer, hereby freely, voluntarily and without duress execute this Release under the following terms:

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Release and Waiver. I, the Volunteer, acknowledge and understand that participation in the Activities may involve certain risks, including, but not limited to, personal injury(ies), bodily injury, illness, permanent disability, property damage, loss and/or death ("Risks"). These Risks include, but are not limited to, exposure to and/or infection with viruses and/or bacterial infection even in ideal conditions, and despite any and all reasonable efforts made to mitigate such Risks.

I, the Volunteer, further confirm that prior to engaging in the Activities, I may be required to complete a health screening questionnaire provided by one or more of the Released Parties. I agree that I will answer all questions on the questionnaire truthfully. I agree to not participate in any Activities if, at such time I am unwell I further agree to follow all safety precautions outlined by any Released Party while volunteering.

In consideration of and in order to be allowed to participate in the Activities, I do hereby release and forever discharge and hold harmless the Released Parties and their successors and assigns from any and all liability, claims, demands, costs and damages of any kind, whether arising from tort, contract or otherwise, which I or my heirs, assigns, next of kin or legal representatives may have or which may hereinafter accrue, arise from, or are in any way related to my Activities with any of the Released Parties, including but not limited to Risks, whether caused wholly or in part by the simple negligence, fault or other misconduct of any of the Released Parties or of other volunteers, other than their intentional or grossly negligent conduct.

I understand and acknowledge that by signing this Release I knowingly assume the Risks associated with the Activities. I also understand that the Released Parties do not assume any responsibility for or obligation to provide financial assistance or other assistance, including but not limited to medical, health or disability insurance in the event of injury, illness, death or property damage

I understand and acknowledge that children under the age of 16 are not allowed on Habitat for Humanity worksites while construction is in progress. While minors between the ages of 16 and 18 may be allowed to participate in some types of build site activities, solely as outlined by the Released Parties, I understand that using power tools, excavation, demolition, working on rooftops and similar activities are not permitted for anyone under the age of 18. I agree it is my responsibility to communicate these requirements to any of my minor children who will attend and/or participate in the Activities.

Consent to Transportation and Medical Treatment. I consent to the use of first aid treatment and the use of generic and over-the-counter medications and treatments as directed by manufacturer labels, whether administered by the Released Parties or first aid personnel. In an emergency, I understand the Released Parties may try to contact the individual listed below as an emergency contact. If an emergency contact cannot be reached promptly, I hereby authorize the Released Parties to act as an agent for me to consent to any examination, testing, x-rays, medical, dental or surgical treatment for me as advised by a physician, dentist or other health care provider. This includes, but is not limited to, my assessment, evaluation, medical care and treatment, anesthesia, hospitalization, or other health care treatment or procedure as advised by a physician, dentist or other health care provider. I also authorize the Released Parties to arrange for transportation of me as deemed necessary and appropriate in their discretion. I, the Volunteer, do hereby release, forever discharge and hold harmless the Released Parties from any liability, claim, demand, and action whatsoever brought by me or on my behalf which arises or may hereafter arise on account of any transportation, first aid, assessment, care, treatment, response or service rendered in connection with my Activities with any of the Released Parties.

If the Volunteer is less than 18 years of age, the parent(s) having legal custody and/or the legal guardian(s) of the Volunteer also hereby release, forever discharge and hold harmless the Released Parties from any liability, claim, demand and action whatsoever brought by such volunteer or on his/her behalf which arises or may hereafter arise on account of the decision by any representative or agent of the Released Parties to exercise the power to transport, administer first aid, and consent to assessment, examination, x-rays, medical, dental, surgical or other such health care treatment as set forth in the Parental Authorization for Treatment of, and Travel With, a Minor Child.

Insurance. I understand that, except as otherwise agreed to by the Released Parties in writing, the Released Parties are under no obligation to provide, carry or maintain health, medical, travel, disability, defense costs, or other insurance coverage for any Volunteer. Each Volunteer is expected and encouraged to obtain his or her own health, medical, travel, disability or other insurance coverage.

I understand that I am and remain responsible for payment of such hospital, physician, ambulance, dental, medical or other services obtained for me or my child. I agree that the Released Parties do not assume any responsibility for the payment of such fees or expenses which may be incurred. If I have health insurance, I understand my personal health insurance is my primary coverage.

Confidentiality. I agree that in the course of my participation in the Activities, I may have access to personal and/or health care information of other persons. I agree to maintain the confidentiality of such information, to use such information only as necessary to do my job as a volunteer, and to comply with Habitat for applicable policies regarding such information.

Photographic/Recording Release. I hereby grant and convey unto the Released Parties all right, title and interest in any and all photographs and video/audio/electronic recordings of me, including as to my name, image and voice, made by or on behalf of any of the Released Parties during my Activities with the Released Parties, including, but not limited to, the right to use such materials for any purpose, including fundraising, and to any royalties, proceeds or other benefits derived from them. I understand that I will not have any ownership interest in or to such photographs, images and/or recordings, I have not been provided or promised any compensation to me, and I hereby waive any rights, privileges or claims based on any right of publicity, privacy, ownership or any other rights arising, relating to or resulting from the photographs, images and/or recordings. I understand and agree that this paragraph also applies to my minor child(ren) who are volunteering.

Other. I expressly agree that this Release is intended to be as broad and inclusive as permitted by state law. I further agree that in the event any clause or provision of this Release is held invalid by any court of competent jurisdiction, the invalidity of such clause or provision shall not otherwise affect the remaining clauses or provisions of this Release, which shall continue to be enforceable. Further, a waiver of a right under this Release by a Released Party does not prevent the exercise of any other right.

I have carefully considered my decision, the benefits and risks involved, and hereby give my informed consent to participate in all volunteer Activities. I have read and understand this Release and Waiver of Liability, I acknowledge that any questions of mine have been answered, and I voluntarily agree to the above provisions. It is my intent to bind my heirs, next of kin, assigns and legal representative.

SIGNATURE OF VOLUNTEER 18 YEARS OR OLDER:

Volunteer: Name (please print): _____ Signature: _____

Address: _____

Phone: (H) _____ (C) _____ Email: _____

Date of Birth: _____

Witness: Name (please print): _____ Signature: _____

EMERGENCY CONTACT INFORMATION FOR VOLUNTEER OVER 18 YEARS OF AGE:
Name : _____ Relationship: _____
Address: _____
Phone: (H) _____ (C) _____ (W) _____
Email: _____

IMPORTANT: If the Volunteer is less than 18 years of age, all parents or guardians must complete the signature section below. If only one parent or guardian signs these forms on behalf of a Volunteer who is under 18 years of age, then the undersigned parent or guardian of the Volunteer hereby covenants, warrants, represents and agrees that he or she is executing these forms on behalf of, and as an agent for, any other individual who may be a parent or guardian of the Volunteer, that he/she is fully authorized to do so, and that by executing such Release and Parental Authorization, the undersigned is binding himself/herself, the Volunteer, and any other parent or guardian of the Volunteer, and all of their heirs, next of kin, assigns, and legal representatives to such Release and Parental Authorization.

Name of Volunteer Under 18 Years Old:

Name: _____ **Date of Birth:** _____

SIGNATURE OF PARENT/GUARDIAN SIGNING ON BEHALF OF THE ABOVE MINOR:

I have carefully considered my decision, the benefits and risks involved and hereby give my informed consent, on behalf of the above listed minor child, for him/her to participate in all Activities as set forth in the above Volunteer Agreement, Release and Waiver of Liability, and such terms are incorporated herein. I have read and understand the above Volunteer Agreement, Release and Waiver of Liability, any questions of mine have been answered, and I voluntarily agree to all such provisions. It is my intent to bind my and the minor Volunteer's heirs, next of kin, assigns, and legal representatives. **Furthermore, I understand that the above Volunteer Agreement, Release and Waiver of Liability is made on behalf of my minor child(ren) and/or legal wards and I represent and warrant to Habitat for Humanity International, Inc. or its affiliated organizations that I have the full authority to sign this on behalf of such minor(s).**

Parent/Guardian: Name (please print): _____ Signature: _____

Address: _____

Phone: (H) _____ (C) _____ E-mail: _____

Witness: Name (please print): _____ Signature: _____

Parent/Guardian: Name (please print): _____ Signature: _____

Address: _____

Phone: (H) _____ (C) _____ E-mail: _____

Witness: Name (please print): _____ Signature: _____

EMERGENCY CONTACT INFORMATION FOR THE ABOVE LISTED MINOR VOLUNTEER:

Name: _____ Relationship: _____

Address: _____

Phone: (H) _____ (C/W) _____ E-mail: _____

REVISION HISTORY

Date	Explanation
July 2020	The volunteer waiver template was reviewed in July 2020 as part of a regularly scheduled legal review process. While the previous waiver template contained broad assumption of risk language, additional language was added to expressly address COVID-19 related risks. This includes requiring that all volunteers agree to comply with all COVID-19 protocols set by Habitat, as well as specific and increased release language for COVID-19 related damages. In addition to COVID-19 updates, the July 2020 version of the volunteer waiver template makes minor adjustments to the youth activities and photo release sections. Lastly, it addresses situations where only one parent or legal guardian is signing on behalf of a minor. Affiliates should continue to consult with their Boards and local counsel for state-specific issues related to volunteer waivers.
June 2021	The volunteer waiver was updated in June 2021 to add the concept of online engagement to the definition of possible volunteer "Activities."
June 2024	modify COVID-19 language given current circumstances; update photo release language.