

VOLUNTEER APPLICATION

FISCAL YEAR 2027

(Please only blue or black ink to complete)

VOLUNTEER INFORMATION – Please Print Clearly

NAME:

STREET ADDRESS:

CITY, STATE, ZIP:

TELEPHONE#:

EMAIL:

DATE OF BIRTH:

EMERGENCY CONTACT NAME:

RELATIONSHIP:

TELEPHONE #:

VOLUNTEER OPPORTUNITIES

☐ HOUSE CONSTRUCTION

☐ ADMINISTRATIVE SUPPORT

☐ HABITAT RESTORE

☐ EVENTS/SPECIAL PROJECTS

AVAILABILITY

Best days of the week and times you are available:

SPECIFIC SKILLS, EXPERIENCE, EDUCATION

Skills such as construction, clerical, computer, retail, customer service, fundraising, mentoring, etc.

AFFILIATIONS

BUSINESS,
CONGREGATION, ORGANIZATION,
ETC. IF APPLICABLE

WILL YOU VOLUNTEERING AS PART OF
A GROUP OR AS AN INDIVIDUAL?

☐ GROUP

☐ INDIVIDUAL

ARE YOU COMPLETING SERVICE
HOURS FOR SCHOOL/ORGANIZATION?

☐ YES

☐ NO

HOW DID YOU HEAR ABOUT HFH OF GVC? **DO YOU WANT TO BE INCLUDED ON OUR MAILING LIST
FOR CEREMONIES & SPECIAL EVENTS?**☐**YES**☐**DO YOU WANT TO RECEIVE ELECTRONIC NEWSLETTERS AND
NOTICES OF VOLUNTEER OPPORTUNITIES BY E-MAIL?**☐**YES**☐**PHOTO RELEASE**

The Volunteer does hereby grant and convey unto Habitat for Humanity of Greater Volusia County, Inc. ("HFH of Greater Volusia County") and Habitat for Humanity International, Inc. ("HFHI") all rights, title, and interest in any and all photographic images and video or audio recordings made by HFH of Greater Volusia County during the Volunteer's Activities, including, but not limited to, any royalties, proceeds, or other benefit derived from such photographs or recordings.

Initials: _____**RELEASE AND WAIVER OF LIABILITY**

The Volunteer desires to work as a volunteer for HFH of Greater Volusia County, Inc. and HFHI and engage in the activities related to being a Volunteer (the "Activities"). The Volunteer understands that the Activities may include, but are not limited to, constructing and rehabilitating residential buildings, working in the Habitat office, working in the ReStore, and working offsite at special events.

The Volunteer does hereby release HFH of Greater Volusia County and HFHI from any liability or claim that the Volunteer may have against HFH of Greater Volusia County with respect to any bodily injury, personal injury, illness, death, or property damage that may result from Volunteer's Activities with HFH of Greater Volusia County. The Volunteer releases HFH of Greater Volusia County and HFHI from any claim whatsoever which arises on account of any first aid, treatment, or service rendered in connection with the Volunteer's Activities with HFH of Greater Volusia County.

Printed Name: _____**Signature:** _____ **Date:** _____

PLEASE RETURN COMPLETED FORM TO:
HFH of Greater Volusia County, Inc.
Attn: Albert Cabrera, Volunteer Manager
1030 W. International Speedway Blvd., 2nd Floor
Daytona Beach, FL 32114 Phone: (386) 257-9950 / Fax: (386) 257-4980
Or email application to: ACabrera@habitatgvc.org

Volunteer Applications must be returned and processed **PRIOR** to performing any volunteer activity.