Habitat for Humanity® of Greater Volusia County

VOLUNTEER APPLICATION
FISCAL YEAR 2026

VOLUNTEER INFORMATION – Please Print Clearly

NAME:

STREETADDRESS:

CITY, STATE, ZIP:

TELEPHONE#:

EMAIL:

DATE OF BIRTH:

EMERGENCY CONTACT NAME:

REALTIONSHIP: **TELEPHONE #:**

VOLUNTEER OPPORTUNITIES

- ☐ HOUSECONSTRUCTION
- ☐ ADMINISTRATIVE SUPPORT
- ☐ HABITATRESTORE
- ☐ EVENTS/SPECIAL PROJECTS

AVAILABILITY

Bestdaysoftheweekandtimesyouareavailable:

SPECIFIC SKILLS, EXPERIENCE, EDUCATION

Skillssuchasconstruction,clerical,computer,retail,customerservice,fundraising, mentoring, etc.

AFFILIATIONS

BUSINESS, CONGREGATION,ORGANIZATION, ETC. IFAPPLICABLE

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

AREYOUCOMPLETING SERVICE HOURSFOR 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** ☐

DOYOUWANTTORECEIVEELECTRONICNEWSLETTERSAND NOTICESOFVOLUNTEEROPPORTUNITIESBYE-MAIL? ☐ **YES** ☐

PHOTO RELEASE

TheVolunteerdoesherebygrantandconveyuntoHabitatforHumanityofGreaterVolusiaCounty,Inc.("HFHofGreaterVolusia 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: _____

RELEASEANDWAIVEROFLIABILITY

TheVolunteer desirestoworkasavolunteerforHFHofGreaterVolusiaCounty,Inc.andHFHIandengageintheactivitiesrelatedto 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 resultfromVolunteer'sActivitieswithHFHofGreaterVolusiaCounty.TheVolunteerreleasesHFHofGreater Volusia CountyandHFHI fromanyclaimwhatsoeverwhicharisesonaccountofanyfirstaid,treatment,orservicerendered in connectionwiththeVolunteer's Activities with HFH of Greater Volusia County.

Printed Name: _____

Signature:_____ **Date:** _____

PLEASERETURNCOMPLETEDFORMTO:
HFHofGreaterVolusiaCounty,Inc.
Attn:Albert Cabrera, VolunteerManager
1030W.InternationalSpeedwayBlvd.,2ndFloor
Daytona Beach, FL 32114Phone:(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.