



## Volunteer Skills and Interest Survey

Habitat for Humanity looks forward to working with volunteers who are interested in sharing their abilities in an effort to help eliminate poverty housing in Benzie County. We try to match volunteers with activities that utilize their areas of expertise and interest .

Name: \_\_\_\_\_ Today's Date: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_

Email: \_\_\_\_\_ Church/Sponsor group: \_\_\_\_\_

Are you a Thrivent member? (Please Circle)    Yes      No

Best Way and Time/Day to contact you: \_\_\_\_\_

Months Available for Work (Please Circle): All Year    Summers Only    Other \_\_\_\_\_

Days Available for Work (Please Circle): Mon Tues Wed Thurs Fri Sat Sun    ALL

### SKILLS AND INTERESTS

Do not be concerned that you are not highly skilled. There are experienced workers to provide guidance. Please indicate as many areas as you think appropriate, and write in the "Other" areas anything else you think might be helpful to us. In each category, please check areas in which you are interested, skilled, or licensed.

#### Construction Work

- |   |   |
|---|---|
| <input type="checkbox"/> Misc. Labor<br><input type="checkbox"/> Framing<br><input type="checkbox"/> Roofing<br><input type="checkbox"/> Vinyl Siding<br><input type="checkbox"/> Drywall - Hang<br><input type="checkbox"/> Drywall - Finish<br><input type="checkbox"/> Interior Finish Trim<br><input type="checkbox"/> Painting | <input type="checkbox"/> Professional Carpet Installer<br><input type="checkbox"/> Professional Vinyl Flooring Installer<br><input type="checkbox"/> Licensed Plumber<br><input type="checkbox"/> Licensed Electrician<br><input type="checkbox"/> Licensed HVAC<br><input type="checkbox"/> Team Leader<br><input type="checkbox"/> Site Coordinator<br><input type="checkbox"/> Other _____ |
|---|---|

#### Non-Construction Work

- |  |   |
|--|---|
| <input type="checkbox"/> General Office/Phone/Reception/Filing<br><input type="checkbox"/> Bulk Mailing<br><input type="checkbox"/> Telephoning<br><input type="checkbox"/> Fund Raising Worker<br><input type="checkbox"/> Writing Articles<br><input type="checkbox"/> Computer Work | <input type="checkbox"/> Provide Snacks or Lunch at jobsite<br><input type="checkbox"/> Food Prep/Service for fundraisers<br><input type="checkbox"/> Information Booth Worker at area fairs<br><input type="checkbox"/> Photography<br><input type="checkbox"/> Legal Services (Michigan BAR Attorney)<br><input type="checkbox"/> Run Errands<br><input type="checkbox"/> Other _____ |
|--|---|

**I Wish to Serve on a Committee**

- Site Selection and Construction
- Family Selection and Support
- Resource Development and Public Relations
- Church and Community Relations Advisory Council
- Board of Directors

**Other Volunteer Opportunities**

- Coordinator for volunteers
- Speakers' Bureau
- Pledge Program
- Church Contact (for your place of worship)
- Liaison to your place of business/school/organization
- Newsletter Editor

**Emergency Contact Information**

In case of emergency, contact:

Name: \_\_\_\_\_ Relationship to you: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_

Physician: \_\_\_\_\_ Hospital: \_\_\_\_\_

Existing condition(s) that your crew leader should be aware of:

(Note: It is your responsibility to notify your crew leader of any such condition each time you work as a volunteer.)

**Volunteer Liability Release**

I hereby release Habitat for Humanity of Benzie County and any of its associations, including its agents, directors, officers, or workers, from any and all claims, demands, suits, or causes of action against it which I have or may have in the future with regard to any and all accidents, injuries or damages to me or my property arising from work performed on Habitat for Humanity projects. I understand that I am a volunteer working on a project and as such waive all rights to claims, demands, suits, or causes of action for injury or damage sustained in relation hereto.

**Volunteer Accident Insurance Coverage**

I further understand that Habitat for Humanity of Benzie County currently provides Volunteer Accident Medical Insurance Coverage with a \$250,000 limit. This coverage is primary coverage insurance for volunteers without personal accident medical insurance and becomes secondary coverage insurance for volunteers with existing personal accident medical insurance coverage subject to all deductibles and policy terms and conditions relating to working as a volunteer on a Habitat for Humanity project.

I further state that I have carefully read the foregoing release and know the contents thereof, and sign as my own free act.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_