

**DISASTER RECOVERY SUPPORT INITIATIVE**  
**A MINISTRY OF CHURCH OF THE BRETHREN, THE UNITED CHURCH OF CHRIST AND THE  
 CHRISTIAN CHURCH (DISCIPLES OF CHRIST)**

**VOLUNTEER REGISTRATION/ RELEASE (PAGE 1 OF 2)**

<b>Project Location</b>		<b>Dates volunteer served</b> From ___/___/___ To ___/___/___		<b># Days Worked</b>
<b>Disaster Type</b>	<b>Project Director(s)</b>			
<b>Name (PLEASE PRINT CLEARLY)</b>			<b>Home Phone</b> (____) _____	
<b>Mailing Address</b>			<b>Cell Phone if You Have Cell Phone With You</b> (____) _____	
<b>City</b>	<b>State</b>	<b>Zip</b>	<b>Email</b>	
<b>Emergency Contact Name</b>		<b>Relationship</b>	<b>Emergency Phone</b> (____) _____	
<b>Denomination</b>	<b>Local Church</b>		<b>District</b>	
<b>Medical Insurance Provider</b>		<b>Medical Insurance ID #</b>		<b>Age</b>
<p>Indicate the amount of experience you have had in each area listed below, by ranking them 1 to 5, and if you are willing to teach or learn by marking a <b>T</b> (for Teach) or an <b>L</b> (for Learn).</p> <p><b>1</b> Professional/Licensed    <b>2</b> Much Experience    <b>3</b> Some Experience    <b>4</b> Little Experience    <b>5</b> No Experience</p>				
_____ Block Masonry	_____ Electrical	_____ HVAC	_____ Roofing	
_____ Brick Masonry	_____ First Aid	_____ Insulation	_____ Siding	
_____ Cabinets	_____ Flooring-wood/laminate	_____ Large Group Cooking	_____ Tile	
_____ Concrete	_____ Framing-exterior	_____ Painting	_____ Trim	
_____ Drywall	_____ Framing-interior	_____ Plumbing	_____ Other _____	

Additional information about yourself, such as hobbies, experiences, and interests:

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**VOLUNTEER REGISTRATION /RELEASE (PAGE 2 OF 2)**

**Assumption of Risk and Release**

I understand that by volunteering, to assist any of the entities or persons listed below, I do so at my own risk. In consideration of being permitted to assist in disaster cleanup and reconstruction, I further agree that any and all of the entities or persons listed shall not be liable for any damages arising from personal injuries sustained by me at or about the disaster site, or in traveling to and from the location;

I further fully and forever release and discharge any and all of the entities listed below, its directors, employees and agents, and any persons listed, from any and all claims, demands, damages or causes of action, present or future, whether the same be known, anticipated or unanticipated, resulting from or arising out of my service in disaster response.

*(Please initial by each)*

\_\_\_\_\_ Brethren Disaster Ministries, a program of the Church of the Brethren Inc., an Illinois not-for-profit corporation  
Christian Church (Disciples of Christ) Disciples Volunteering  
United Church of Christ Disaster Ministries

I have read and understood, and sign the foregoing Assumption of Risk and Release this \_\_\_\_\_day  
of \_\_\_\_\_, 20\_\_\_\_. Project Location: Lexington and Richland County, South Carolina

\_\_\_\_\_  
← (Signature) (Parent or Legal Guardian, if under 18) →

**Ethical Standards for Disaster Volunteers  
on Disaster Recovery Support Projects**

**All volunteers strive to...**

1. Represent the Church in all they do with attitudes and actions that keep with the teaching of Christ and the values of the Christian Faith. Each volunteer is a living example of Christ ministering to others.
2. Understand and accept the reality that their actions and attitudes reflect on others.
3. Be sensitive to people and take time to listen to disaster survivors. (Listening requires an understanding heart as well as a listening ear.)
4. Assist disaster survivors within the limits of their training and abilities.
5. Respect the belongings of disaster survivors, and be especially careful to salvage irreplaceable personal items such as family pictures, legal documents, wedding albums, etc.
6. Put their faith into action and should not engage in religious exploitation of disaster survivors. However, sharing of one's faith when asked, "Why are you here?" is appropriate.
7. Respect personal information obtained from disaster survivors. Sharing of financial matters and/or personal matters should not be done. Sharing general experiences of work done / persons served, is acceptable.
8. Be sensitive to persons' feelings and seek permission to take pictures of individuals and damaged property.
9. Keep the volunteer housing facility clean leaving accommodations in as good or better shape than when they arrived assisting in meal preparation, dish washing, and general cleanup.
10. Be good stewards of donated funds, tools, materials and time; putting wants and desires aside in order to address the needs of others.
11. Be committed to stewardship of the environment and will take extra measures, whenever possible, to preserve natural resources and conserve energy.

**Volunteers may not...**

1. Not solicit and/or contribute funds or in-kind donations for individual disaster survivors.
2. Accept damaged items from the disaster survivor nor attempt to salvage items from the disaster area for their personal use.
3. Accept cash contributions from persons being assisted. Persons wishing to make contributions are encouraged to make contributions by check, payable to the Local Recovery Group.

I have read and agree to abide by the above standards to the best of my ability.

\_\_\_\_\_  
(Signature)

**AUTHORIZATION OF CONSENT TO EMERGENCY CARE OF MINOR**

This \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, I, \_\_\_\_\_ of \_\_\_\_\_, the parent of, \_\_\_\_\_, a minor, born \_\_\_\_\_, do hereby authorize any one of the officers and staff of the Disaster Recovery Support Initiative Project to consent to any emergency care, including X-ray examination, anesthetic, medical or surgical treatment, and hospital care, to be rendered to the minor under the general or special supervision and on the advice of any physician or surgeon duly licensed to practice medicine in any state.

\_\_\_\_\_ has the following allergies and/or medical conditions:

Insurance Company: \_\_\_\_\_ Policy #: \_\_\_\_\_

Phone number in case of emergency: \_\_\_\_\_

Signature of Parent or Legal Guardian:

Signature of Witness:

**Authorization of Consent to Emergency Care of Minor**

This \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, I, \_\_\_\_\_ of \_\_\_\_\_, the parent of, \_\_\_\_\_, a minor, born \_\_\_\_\_, do hereby authorize any one of the officers and staff of the Disaster Recovery Support Initiative Project to consent to any emergency care, including X-ray examination, anesthetic, medical or surgical treatment, and hospital care, to be rendered to the minor under the general or special supervision and on the advice of any physician or surgeon duly licensed to practice medicine in any state.

\_\_\_\_\_ has the following allergies and/or medical conditions:

Insurance Company: \_\_\_\_\_ Policy #: \_\_\_\_\_

Phone number in case of emergency: \_\_\_\_\_

Signature of Parent or Legal Guardian:

Signature of Witness:

## POLICY ON MINORS AS VOLUNTEERS

The building trade is classified as a “dangerous occupation” by OSHA (Occupational Safety & Hazard Administration). Keeping in mind the safety of volunteers under the age of 18, the guidelines below will be followed.

### Youth and Youth Groups:

- Youth groups and work teams may include youth with a minimum age of 15.
- The group must include adequate adult supervision – with a ratio of at least one adult for every four youth.
- Youth groups and work teams that include both male and female teens must be accompanied by both male and female adult advisors in proportionate numbers.

### Families:

- Fourteen-year-olds may be allowed to participate if accompanied by a parent or Court Appointed legal guardian. This means the parent or guardian must accompany the minor ***at all times*** whether on the worksite or at the volunteer housing site.
- No children under 14 will be allowed to participate.

### Required Forms:

All volunteers under age 18 must turn in the following forms in order to be allowed to work on a disaster response project. These forms are to be mailed to the Project Site office at least one week prior to volunteer’s arrival on site.

- An *Authorization of Consent to Emergency Care of Minor* form completed and signed by a parent or legal guardian.
- An *Assumption of Risk Agreement and Release* form signed by both the minor volunteer and a parent or legal guardian.

### Restrictions

- Persons under the age of 16 **cannot** work on scaffolding or extension ladders, any roof higher than one story, or any roof over a 4/12 pitch.
- Persons under the age of 16 will **not** be allowed to operate power tools.
- Persons 16-17 years of age must be checked for power tool operation and safety by the Disaster Project Director before being permitted to operate power tools.