



526 Edelweiss Village Parkway | Gaylord, MI 49735  
Office: (989) 732-6070 | Fax: (989) 731-4578  
Email: [office@otsegohabitat.org](mailto:office@otsegohabitat.org)

Dear Volunteer:

Welcome to the Otsego County Habitat for Humanity Family! We hope you will find volunteering with us rewarding as you join us in our mission as a nondenominational Christian housing ministry, working in partnership to build adequate housing, creating stronger families and a better community.

Enclosed is an informational packet about Otsego County Habitat for Humanity. We also ask that you fill out the enclosed Volunteer Registration Form, Emergency Contact Form and Release & Waiver of Liability Form.

We invite you take our safety training courses available on the web, or through our office. To access the web site please go to [www.hfhaffiliateinsurance.com](http://www.hfhaffiliateinsurance.com) from there you will be required to enter a password, which is **Lockton**. Choose the safety course(s) pertaining to where you would like to work in. It could be the ReStore or the building safety courses. The password to start the quiz is **W8NAEBTG**. When you have finished answering the questions, please fill out your name and state along with Otsego County Habitat for Humanity as the place to where you will be volunteering. We will receive a certificate stating you have completed the training and will pass this along to you for your records.

Additional information is available via our website at [www.otsegohabitat.org](http://www.otsegohabitat.org)

Thank you very much for volunteering your time and talents to help us continue our mission!



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## FACT SHEET

- ✚ **Otsego Habitat for Humanity of Gaylord was founded on September 8, 1993.**
- ✚ **Families are selected for Habitat for Humanity homes based upon current inadequate housing conditions, that they can afford a down payment and make the required monthly mortgage payments, and each family is required to work 250 hours of “sweat equity” up to 350 hours per family in the construction of their homes.**
- ✚ **It takes approximately a year to build an average Otsego County Habitat for Humanity home.**
- ✚ **Otsego County Habitat for Humanity sells each home at the appraised, fair market value.**
- ✚ **Each homeowner has a monthly mortgage payment that includes principal, and escrow for insurance and taxes.**
- ✚ **All Otsego County Habitat for Humanity homes are built with community-donated funds.**
- ✚ **Our homeowners are also our investors; their mortgage payments are reinvested into the organization to serve *more* families in the future.**
- ✚ **Otsego Habitat for Humanity operates a ReStore, which sells donated home improvement material, along with new and gently used furniture, and decorator items, at great prices.**
- ✚ **Our volunteer base is growing and has included many skilled and talented members of our community.**
- ✚ **Mission Statement: Otsego County Habitat for Humanity is a nondenominational Christian housing ministry, works in partnership to build or renovate adequate housing, creating stronger families and a better community.**



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## Volunteer Registration Form

PLEASE PRINT CLEARLY

Date: \_\_\_\_\_

Name: \_\_\_\_\_ Email Address: \_\_\_\_\_

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

Home#: \_\_\_\_\_ Cell: \_\_\_\_\_

How did you hear about us? \_\_\_\_\_

Affiliation Group (if any): \_\_\_\_\_

Please mark your available days & time, and interests:

ReStore       Build       Affiliate Office       Board Member

Please fill in your available volunteer time

Monday \_\_\_\_\_ Tuesday \_\_\_\_\_ Wednesday \_\_\_\_\_

Thursday \_\_\_\_\_ Friday \_\_\_\_\_ Saturday \_\_\_\_\_

Please list any prior experience you have and include your likes and dislikes.

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What would you like to achieve by volunteering for Habitat?

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You will also need to complete and sign the Release and Waiver of Liability & Emergency Contact Form.

**Thank You!**



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## 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") executed on this day of \_\_\_\_\_, 20\_\_, by \_\_\_\_\_ (the "Volunteer") in favor of Habitat for Humanity International, Inc., a nonprofit corporation, and Habitat for Humanity of Otsego County Inc., a Michigan nonprofit corporation, their directors, officers, employees, volunteers, and agents (collectively, "Habitat").

The Volunteer desires to work as a volunteer for Habitat and engage in the activities related to being a volunteer (the "Activities"). The Volunteer understands that the Activities may include constructing and rehabilitating residential buildings, working in the Habitat offices, and living in housing provided for volunteers of Habitat. The Volunteer hereby freely, voluntarily, and without duress executes this Release under the following terms:

**RELEASE AND WAIVER.** Volunteer does hereby release and forever discharge and hold harmless Habitat and its successors and assigns from any and all liability, claims, and demands of whatever kind or nature, either in law or in equity, which arise or may hereafter arise from Volunteer's Activities with Habitat. Volunteer understands that this Release Discharges Habitat from any liability or claim that the Volunteer may have against Habitat with respect to any bodily injury, personal injury, illness, death, or property damage that may result from Volunteer's Activities with Habitat, whether caused by the negligence of Habitat or its officers, directors, employees, or agents or otherwise. Volunteer also understands that Habitat does 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 or illness.

**MEDICAL TREATMENT.** Volunteer does hereby release and forever discharge Habitat from any claim whatsoever which arises or may hereafter arise on account of any first aid, treatment, or service rendered in connection with the Volunteer's Activities with Habitat.

**ASSUMPTION OF THE RISK.** The Volunteer understands that the Activities included work that may be hazardous to the Volunteer, including, but not limited to, construction, loading and unloading, and transportation to and from the work sites. Volunteer hereby expressly and specifically assumes the risk of injury or harm in the Activities and releases Habitat from all liability for injury, illness, death, or property damage resulting from the Activities.

**INSURANCE.** The Volunteer understands that, except as otherwise agreed to by Habitat in writing, Habitat does not carry or maintain health, medical, or disability insurance coverage for any Volunteer. Each Volunteer is expected and encouraged to obtain his or her own medical or health insurance coverage.

**PHOTOGRAPHIC RELEASE.** Volunteer does hereby grant and convey unto Habitat all right, title, and interest in any and all photographic images and video or audio recordings made by Habitat during the Volunteer's Activities with Habitat, including, but not limited to, any royalties, proceeds, or other benefits derived from such photographs or recordings.

**OTHER.** Volunteer expressly agrees that this Release is intended to be as broad and inclusive as permitted by the laws of the State of Michigan, and that this Release shall be governed by and interpreted in accordance with the laws of the State of Michigan. Volunteer agrees that in the event that any clause or provision of this Release shall be held to be invalid by any court of competent jurisdiction, the invalidity of such clause or provision shall not otherwise affect the remaining provisions of this Release which shall continue to be enforceable.

IN WITNESS WHEREOF, Volunteer has executed this Release as of the day and year first above written.

Volunteer: \_\_\_\_\_ Witness: \_\_\_\_\_

Volunteer: \_\_\_\_\_ Please Print Name  
Witness: \_\_\_\_\_ Please Print Name

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

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



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## EMERGENCY CONTACT FORM

### Personal Information

Full Name: \_\_\_\_\_  
*Last* *First* *M.I.*

Address: \_\_\_\_\_  
*Street Address* *Apartment/Unit #*

\_\_\_\_\_ *City* *State* *ZIP Code*

Home Phone: ( ) \_\_\_\_\_ Alternate Phone: ( ) \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Birth Date: \_\_\_\_\_ Marital Status: \_\_\_\_\_

Spouse's Name: \_\_\_\_\_

Spouse's Employer: \_\_\_\_\_ Spouse's Work Phone: ( ) \_\_\_\_\_

### Emergency Contact Information

Full Name: \_\_\_\_\_  
*Last* *First* *M.I.*

Address: \_\_\_\_\_  
*Street Address* *Apartment/Unit #*

\_\_\_\_\_ *City* *State* *ZIP Code*

Primary Phone: ( ) \_\_\_\_\_ Alternate Phone: ( ) \_\_\_\_\_

Relationship: \_\_\_\_\_

If you have additional health concerns or issues, you would like us to know about in case of emergency, please list below:

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## Release Form for Media Usage

I the undersigned, do hereby consent and agree that Otsego County Habitat for Humanity, its employees, or agents have the right to take photographs, videotape, or digital recordings of me beginning on \_\_\_\_\_ and ending on \_\_\_\_\_ and to use these in any and all media, now or hereafter known, and exclusively for the purpose of supporting habitat's mission. I further consent that my name and identity may be revealed therein or by descriptive text or commentary.

I do hereby release to Otsego County Habitat for Humanity, its agents, and employees all rights to exhibit this work in print and electronic form publicly or privately and to market and sell copies. I waive any rights, claims, or interest I may have to control the use of my identity or likeness in whatever media used. I understand that there will be no financial or other remuneration for recording me, either for initial or subsequent transmission or playback.

I also understand that Otsego County Habitat for Humanity is not responsible for any expense or liability incurred because of my participation in this recording, including medical expenses due to any sickness or injury incurred as a result.

I represent that I am at least 18 years of age, have read and understand the foregoing statement, and am competent to execute this agreement.

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Witness for the undersigned: \_\_\_\_\_

Signature: \_\_\_\_\_