



## CROSS Coalition, Ltd.

### Volunteer Registration/Information Form

Mission Location:	Date of Mission Trip:
Name:	Date of Birth:
Address:	City, State, Zip:
Cell:	Email:

#### Medical Information and Release

**Coverage:** I certify that I have sufficient health, accident and liability insurance or other benefits to cover any bodily injury or property damage I may incur while participating in a **CROSS Coalition/CCRM** Project and to cover bodily injury or property damage caused to a third party as a result of my participation in a **CROSS Coalition/CCRM** Project, as follows:

Company \_\_\_\_\_

Policy No. \_\_\_\_\_

Company's Address \_\_\_\_\_

**Medical Release:** I hereby state that I am in good health and have all medications necessary to treat any allergic or chronic conditions, and I am able to administer such medications without assistance.

I \_\_\_\_\_ (volunteer's name), authorize \_\_\_\_\_ (team leader) to consent if at any time during my participation in a **CROSS Coalition/CCRM** Project I need emergency medical care and am not able to give consent because of my physical or mental condition.

I consent to any necessary examination, anesthetic, medical diagnosis, surgery, or treatment and/or hospital care rendered under the general supervision and on the advice of any physician or surgeon licensed to practice medicine by the state in which they practice, during the duration of the trip identified above and further authorize the release of medical information from my personal medical records for the purpose of my medical care.

#### **Person to be notified in case of emergency:**

Name \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Telephone \_\_\_\_\_(evening) \_\_\_\_\_(daytime)

**Photo Use:** I give permission for pictures/digital images of me to be taken during the mission.

YES \_\_\_\_\_ NO \_\_\_\_\_

**Christian Conduct:** I understand that team members must be flexible, cooperative, and cheerful. I agree to cooperate at all times with the team leader, team members, and the host agency concerning daily assignments, food, lodging, and transportation. I agree to stay with the team from beginning to end, to abstain from the use of alcohol and tobacco while on the mission trip, to conduct myself in an appropriate Christian manner, and to share my faith to the best of my ability.

**Liability Release Form:** I understand that I am about to embark on travel into circumstances with unknown personal safety and/or sanitary conditions. I understand that there is inherent risk in the activity which I am undertaking. Because I understand the inherent risk in this undertaking, I agree to release and hold harmless **CROSS Coalition, Ltd.** and its member churches, noted as **CROSS, Coastal Carolina Rebuilding Ministry (CCRM)**, the mission site leaders, the host agency, the North Carolina Conference of the United Methodist Church and any related agency, general church agency, conference, district, local church, member, employee or agent from any liability for personal injury, damages, loss, accidents, and/or delays resulting from my participation in the **CROSS Coalition/CCRM** project. This release is given in consideration of **CROSS Coalition/CCRM's** efforts in making arrangements for my participation. This release is intended to bind me, my heirs, and personal representatives.

**(If participant is under 18 years of age, parent/guardian must also sign this form.)**

By signing below, I confirm that I agree to comply with all the above.

Signature of Participant \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian (if under 18) \_\_\_\_\_ Date \_\_\_\_\_

Witness \_\_\_\_\_ Date \_\_\_\_\_



## Volunteer Bio & Skills Survey

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

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

Occupation: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Name of Organization: \_\_\_\_\_ Team Leader? \_\_\_yes \_\_\_no

Organization Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Would you like to receive our newsletter: \_\_\_yes \_\_\_no

In general, when are you available to volunteer: \_\_\_\_\_ weekdays \_\_\_\_\_ weeknights \_\_\_\_\_ weekends

### Skills Assessment

Please rate yourself (1-3) in the areas that you are interested in serving, according to your experience level.

1 = Amateur, needs guidance but willing to learn

2 = Experienced, can work independently but may have questions

3 = Professional, can work independently and instruct others; licensed where applicable

<b>Construction</b>	<b>Marketing</b>	<b>Hospitality</b>
1 2 3 General Handiwork	1 2 3 Website Updates	1 2 3 Volunteer Coordination
1 2 3 Carpentry	1 2 3 Social Media Updates	1 2 3 Help Prepare Meals
1 2 3 Flooring	1 2 3 Photography	1 2 3 Deliver Snacks to job sites
1 2 3 Sheetrock	1 2 3 Grant Writing	1 2 3 Support Visiting Teams
1 2 3 Plumbing	1 2 3 Newsletter	1 2 3 Creative Tasks
1 2 3 Electrical	1 2 3 Press Releases	
1 2 3 Roofing	1 2 3 Event Planning	<b>Office Support</b>
1 2 3 Painting	1 2 3 Fundraising	1 2 3 Clerical Tasks
1 2 3 HVAC repair	1 2 3 Legal Counsel	1 2 3 Reception/Phone
1 2 3 Appliance Installation	1 2 3 Public Speaking	1 2 3 Data Entry
1 2 3 Project Management	1 2 3 Ambassador	



## What to Bring

### Work Gear:

- Modest T-shirts & shorts that can get dirty (no spaghetti straps, mid-drifts showing. Ditch the designer labels, team logos and spotlessly clean clothing -- this sets us apart from the people we are trying to reach)
- long pants & long sleeve shirt (required for some jobs)
- closed toe sneakers or boots
- work gloves
- hat or visor
- tools/hammer/tape measure

### Personal Needs:

- bath towels and wash cloths
- personal toiletry items
- shower shoes
- hair dryer (find a friend and plan to share)
- medications
- air mattress recommended/sheets/pillow
- modest sleeping wear
- modest swim suit (one piece) and towel
- sunscreen
- bug spray (no perfume or cologne at work site)

### Other:

- bible
- pencil/pen
- cards and games
- spending money for meals while traveling (not to exceed \$75)

## What NOT to Bring

Cigarettes  
Lighters/matches  
Alcohol  
Illegal drugs  
Weapons