



CHRISTMAS IN ACTION

of Oakland County, Inc.

P.O.Box 300324~Waterford, MI 48330~248.618.7433~

SIGN UP ON LINE AT www.ciaoaklandcounty.org



VOLUNTEER APPLICATION

Work Day is Saturday, April 30, 2011 (Rain or Shine)

**** Applications must be received no later than April 1, 2011****

FILL IN ALL LINES COMPLETELY - We will contact you by email and/or cell numbers in case of changes

Name: (PLEASE PRINT <u>CLEARLY</u>)	
First time volunteer? Yes__ No__;	
Between 12 & 17 yrs. Old? Yes__ No__ (if yes, Parental Consent form on back of this page and is required for youth 12-17 yrs)	
Address (Is this a new address?__)	
City, State & Zip	Cell Phone:
Email please: Easiest way for us to communicate with you	Home Phone
<input type="checkbox"/> Please assign me with my group. Group Name: _____	
Team Leader Name: _____ Contact Number: _____	
Does your employer offer matching gifts? Yes__ No__ Employer Name: _____	

Skills	Licensed or Skilled Trades	I'm handy In these areas	Skills <input type="checkbox"/> HOUSE CAPTAIN <input type="checkbox"/> Site Coordinator	Shirt Size
Carpentry			<input type="checkbox"/> Train as House Captain?	<input type="checkbox"/> Medium <input type="checkbox"/> Large <input type="checkbox"/> Extra Large <input type="checkbox"/> 2X
Electrical			<input type="checkbox"/> Train as Site Coordinator?	<input type="checkbox"/> Donate \$5 for your shirt?
Plumbing			<input type="checkbox"/> Parking Coordinator	<input type="checkbox"/> I have a truck and am willing to pick up and deliver items?
Heating			<input type="checkbox"/> Painting	<input type="checkbox"/> Please contact me; I want to become more involved?
Roofing			<input type="checkbox"/> Food Runner	<input type="checkbox"/> Available Sunday to complete job?
Masonry			<input type="checkbox"/> Yard Work (At the Assigned Home)	<input type="checkbox"/> I am interested in helping CIA get started in my community?
Dry Wall			<input type="checkbox"/> Rake -n- Run (Traveling Teams) Rake -n- Run to the next house & so on!	<input type="checkbox"/> Sign me up to help with pre/post Work Day activities?
Carpet Installer			<input type="checkbox"/> Notary	<input type="checkbox"/> Yes, I would like to help with admin duties and data input
Vinyl Flooring			<input type="checkbox"/> Safety & First Aid	<input type="checkbox"/> Yes, I would like to help with Pre and Post Workday

If you are currently not assigned to a group, Check the community you would like to work in;

At the volunteer meeting you will meet the Captain, be given a job assignment so you will know what tools to bring on workday.
Remember to label all tools, bring gloves and a lawn chair.

YES, I'M WILLING TO WORK WHERE I AM NEEDED.

- | | | | |
|---|-----------------------|-----------------------|------------------------------|
| <input type="checkbox"/> Clarkston area | Volunteer Meeting TBD | Volunteer Meeting TBD | information will be e-mailed |
| <input type="checkbox"/> Detroit area: | Volunteer Meeting TBD | Volunteer Meeting TBD | information will be e-mailed |
| <input type="checkbox"/> Pontiac area | Volunteer Meeting TBD | Volunteer Meeting TBD | information will be e-mailed |
| <input type="checkbox"/> Waterford area | Volunteer Meeting TBD | Volunteer Meeting TBD | information will be e-mailed |
| <input type="checkbox"/> Troy area | Volunteer Meeting TBD | Volunteer Meeting TBD | information will be e-mailed |
| <input type="checkbox"/> Oxford area | Volunteer Meeting TBD | Volunteer Meeting TBD | information will be e-mailed |

Mail Applications to: P.O. 300324, Waterford, Mi 48330-0324 ~ 248.618.7433 ~ www.ciaoaklandcounty.org

NOTE: We will make every effort to keep your group together. If you have a group please contact us ASAP, so we can connect you with the community coordinator for further information necessary for groups. Weather related issues will be determined by House Captains at the job site on workday. Volunteer Liability Waiver and Minor Consent forms (kids 12-17) are available when you sign-up on line at www.ciaoaklandcounty.org or call us at 248.618.7433. PARENTAL CONSENTS MUST ALSO ACCOMPANY ALL MINORS TO THE JOBSITE ON WORKDAY.

Volunteer Waiver of Liability-MUST BE FILLED OUT BY EVERY VOLUNTEER

Christmas in Action Workday Saturday April 30, 2011

In consideration of the opportunity afforded me to assist on a voluntary basis in the Christmas in Action Oakland County, Inc. ("Christmas in Action") Senior Rake-n-Run Project, a project in which home repairs for low-income senior homeowners will be completed by volunteers, and in light of the aims and purposes of the community service provided by Christmas in Action in organizing this project;

I hereby waive any right or cause of action arising as a result of my participation in said project from which any liability may or could accrue against Christmas in Action or its officers and directors, employees, agents, donors, volunteers or other affiliates, collectively or individually. Without limiting the generality of the foregoing, I agree that this waiver shall include any rights or cause of action resulting from personal injury to me, death or damage to my personal property directly or indirectly arising from or sustained in connection with my activities for the CIA workday project.

I also grant Christmas in Action, Oakland County, Inc. **permission to take or have taken still and moving photographs and films** including television pictures of myself. I consent and authorize Christmas in Action Oakland County, Inc. its advertising agencies, news media and any other persons interested in Christmas in Action Oakland County, Inc. and its works, to use and reproduce the photographs, films, and pictures and to circulate and publicize the same by all means including, without limiting the generality of the foregoing, newspapers, television media, brochures, pamphlets, instructional materials, books and clinical material.

I understand the success of workday depends on my volunteer commitment; I realize my commitment is critical to help complete the work that has been planned. I also realize that inclement weather is normally temporary and work will continue.

Signed this ___ day of _____, 20___ I am with Group or Team _____ Leaders Phone: _____

Name (Print Clearly)

Signature

Address

City

State

Zip

E-mail please

Cell Phone in case of emergency

PARENTAL CONSENT FORM (minors 12-17)

(Minors MUST return Signed Parental Consent form with their application and bring a 2nd COPY on Workday)

Minor's Full Name (First, Middle, Last)

Minor's Date of Birth

Working with what Group _____ Community working in _____

Minors Cell Phone Number _____

The above named minor has my permission to participate in the Christmas in Action of Oakland County, Inc. Home Repair Project, hereinafter referred to as Project, currently scheduled for _____. On behalf of such minor I have signed a Volunteer's Agreement and Release from Liability, hereinafter referred to as Release, and hereby agree to all of the terms and conditions of the Release.

In case of medical or dental emergency, I understand that every effort will be made to contact me at the telephone number set forth below. If I cannot be reached, I hereby give my permission to the physician or dentist selected by Christmas in Action of Oakland County, Inc. to hospitalize, secure proper treatment for, and to order injections, anesthesia or surgery for the minor named above. A copy of this permission form may be accepted by and treated by the physician as equivalent to the original permission order.

Date

Print Name of Parent/Guardian

Signature of Parent/Guardian

Telephone Number/Cell Number

PLEASE COMPLETE THE FOLLOWING:

Name of Medical Insurance Carrier: _____ Policy Number & Group Number: _____

Minor's Primary Physician: _____ Telephone: _____

Primary Physician's Address: _____

Minor's Dentist/Orthodontist: _____ Telephone: _____

Dentist/Orthodontist Address: _____

Any Food or Drug Allergies: _____ Limitations on Activities: _____

EMERGENCY CONTACT INFORMATION: The parent/guardian listed above will be the initial person to be contacted, please list two other individuals that can be contacted in case of an emergency.

Contact Name

Cell

Relationship to Minor

Contact Name

Cell

Relationship to Minor