

Disaster Relief Deployment Personal Information Form

Revised 4/05/18



Deployment Location: _____ Ministry area _____

Your Arrival: Date _____ Morn. Afternoon Eve. Expected Departure: Date _____ Morn. Afternoon Eve.

Your Legal Name: First _____ Middle _____ Last _____

Your Physical Address _____

City _____ State _____ Zip _____

I am a member of _____ Church in (city) _____

Your Mailing Address SAME AS ABOVE or Street _____

City _____ State _____ Zip _____ Home Phone _____

E-mail _____ Mobile Phone _____

Work Phone _____ Occupation _____ Marital Status _____

Emergency Contact Name _____ Relationship _____

Address _____

City _____ State _____ Zip _____

Mobile Phone _____ Home/Office Phone _____

VOLUNTEER AGREEMENT WITH THE SOUTHERN BAPTISTS OF TEXAS CONVENTION:

As a volunteer member of the Southern Baptists of Texas Convention Disaster Relief Ministry, I agree to:

- Complete a "Personal Information" form to be on file with the Disaster Relief Ministry Department of the SBTC
- Complete the required training, updated training and special training as required for my area of disaster relief
- Take preparation for my spiritual, emotional and physical well being
- Exhibit those attitudes, behaviors, speech, and dress that represents my Lord, my church, my fellow Christians, and my fellow team members
- Wear official disaster relief clothing and SBC disaster relief logos only while engaged in a disaster relief function
- Protect health and safety of myself, team members, victims, and all others while involved in a disaster relief response
- Inform my Unit Director of my limitations and availability to serve in disaster relief
- Pay my own expenses, arrange my own transportation, bring clothing, bedding, and personal items I will need on a disaster
- Provide for my health, accident, liability and other needed insurance
- Assist with unit preparation, training and other unit non-emergency events as availability and ability allow
- Sign the "Volunteer Release and Waiver of Liability"
- Authorize my name, address and phone numbers to be given to those involved in disaster relief.
- **Therefore I,** _____, volunteer to do my best to carry out the purposes of SBC and SBTC disaster relief in the manner stated above.

Applicant Signature _____ Date _____

Disaster Relief Volunteer Release and Waiver of Liability

Warning: By signing this release and waiver of liability you are waiving and releasing legal rights which you may have.

This release and waiver of liability is executed by me, the Volunteer, on the date shown below. I hereby acknowledge and state the following:

I am at least 18 years of age. I desire to volunteer with Southern Baptists of Texas Convention (SBTC) to provide disaster relief services. I have chosen to travel and to perform clean-up, remediation or repair work, and to otherwise assist the victims of disaster. I understand that engaging in these activities may be hazardous to my health, may involve inherently dangerous activities, hard physical labor, heavy lifting and other strenuous activity, working with and around dangerous tools and equipment, in an environment and under conditions that may be without power, sanitation, and otherwise damaged by disaster. I understand that my service entails risks of physical injury, and even death.

I am engaging in this activity at my own risk. In consideration of the opportunity to participate, I accept and assume all risk of injury or harm to myself, including without limitation, any illness, emotional distress, physical disability, personal injury, or death.

For and on behalf of myself, my heirs, administrators, executors and next of kin, I do hereby release and discharge from liability and agree to defend, indemnify and forever hold harmless all other volunteers engaged in this project, SBTC, the Southern Baptist Convention and those corporations in which the Southern Baptist Convention is the sole member, Southern Baptist state conventions and associations, the churches which are in friendly cooperation with these Baptist conventions, associations or churches, and the members, volunteers, employees, servants, agents, officers, and directors of all these, hereafter referred to as releasees, from any and all causes of action arising from or relating to my participation in this effort, including but not limited to travel, lodging, transportation, or on account of first aid or other medical treatment rendered by releasees, for damages I may suffer including but not limited to claims for personal injury, disability, sickness, loss of limb or life, **even if said claims arise from injuries or illnesses or other damages caused by the sole negligence or fault of releasees. Notwithstanding anything which may appear to the contrary, this agreement shall not be understood however to release the intentional acts or gross negligence of the releasees.**

I understand that I am solely responsible for my personal effects and property and that no one will provide security for any of my items and I will hold the above releasees harmless in the event of theft or for loss resulting from any source or cause.

I understand that none of the releasees carries or maintains health, medical, disability, or life insurance coverage for me, and I acknowledge that I have been encouraged to carry such insurance prior to beginning this service.

I state that I undertake to perform this volunteer service without compensation and that, in performing said services, I acknowledge that I am not acting as an employee of the SBTC, the Southern Baptist Convention or any participating church, association or Baptist entity.

This release and waiver is fully understood by me and I enter the same willingly for the purposes herein above stated on this _____ day of _____, 20_____.

Print Name: _____

Applicant Signature: _____ **Witness Signature:** _____