



Statement of Activities

Revive 225 is a home repair and housing rehabilitation ministry of First United Methodist Church of Baton Rouge, LA, providing opportunities for service in the Baton Rouge Area. Volunteers participating in the activities of Revive225 will be expected to be involved in home repair and construction activities, including roofing, carpentry, demolition, drywall, digging, electrical wiring and repair, flooring, framing, glasswork, insulating, masonry, painting, plumbing and other facets of home repair and reconstruction. These activities include, but are not limited to, the use of power tools, such as saws and drills, as well as the use of all types of hand tools. The work will be done in a hot, humid environment and in the likely presence of mold, dust and other allergens. It will likely require climbing with and without tools, supplies and materials as well as working on ladders and in high places such as on roofs and roof framing.

The type and condition of the tools and safety equipment used will be the responsibility of you and/or your work team leaders, who will also supervise the details of the work done and the use of the tools and safety equipment. Although Revive225 personnel will define the scope of work to be done and arrange for materials and supplies, Revive225 assumes no responsibility for the condition of tools and safety equipment provided by work teams or for defects in materials or supplies provided by its vendors.

Volunteers may, in their free time, engage in a variety of non-sponsored recreational activities such as swimming, hiking, volleyball, basketball, softball or other sports activities of their own choosing. Planned activities are likely to include traveling to places of regional interest.

Individual volunteers are NOT required by Revive225 to engage in any work or recreational activity that they do not feel they can safely do. I understand that Revive225 does not carry accident or medical insurance on participating volunteers. I agree that my health insurance will be used for such medical expenses and am aware that I am responsible for the payment of any medical expenses not covered by my insurance.

Permission to Serve

I acknowledge that I have read the Rules and Regulations of Revive225, and understand that Revive225 requires proper conduct, attire and safety equipment, restricts the use of audio devices and tobacco, and prohibits illegal drugs and alcohol. I have also read the above Statement of Activities and hereby consent for myself or my minor child to participate in this home repair and construction ministry. I recognize that construction work can be dangerous and can result in serious injury or even death. I understand that all participants are expected to use due care to protect their own safety and the safety of others. To the full extent permitted by law, I agree to release and hold harmless First United Methodist Church of Baton Rouge and Revive225 and their agents, employees and volunteer workers from any and all liability, claims or causes of action arising out of or connected in any way with participation in the activities of Revive225.

I also hereby grant to Revive225 all right, title and interest in any and all photographic images and audio or video recordings made by or on behalf of Revive225 in connection with my or my minor child's participation in the Project.

Medical Consent and Power of Attorney

In the event that medical treatment is advised or required for an illness or injury during participation in Revive225 for the minor volunteer named below (or for the adult volunteer named below when not in a condition to give consent), I understand that reasonable effort will be made to contact the emergency contact persons listed on my registration form. However, should such persons not be readily available, I hereby consent to x-rays, laboratory tests and other diagnostic studies and to medical, surgical and hospital treatment under the direction and advice of competent physicians and other medical personnel.

For minor participant:

I further designate _____ or, in their absence, any other accompanying adult volunteer, to act in loco parentis to make health care decisions for the minor.

For adult participant:

Should I not be in a condition to give consent, I authorize _____ or, in their absence, any other accompanying adult volunteer, to make health care decisions on my behalf.

I agree to the above Permission to Serve, Medical Consent, and Power of Attorney for Revive225:

[Volunteers aged 18 years or older]

[Volunteers under 18 years of age]

(Please print name of adult participant)

(Please print name of minor participant)

(Signature of adult participant) (mm/dd/yy) (Signature of minor participant) (mm/dd/yy)

(Please print name of parent/legal guardian)

(Signature of parent/legal guardian)

(Relationship to minor)

Notary

STATE OF _____ PARISH or COUNTY OF _____

On this _____ day of _____, _____ (year), before me, _____, personally

appeared _____, known to be the same person described in and who executed the within instrument, and who acknowledged the same to be the free act and deed thereof.

Notary Public _____ Parish/County _____

State of _____ My Commission Expires _____