



Day of Caring

September 10, 2021

NOTE: ALL DAY OF CARING PROJECTS WILL BE **OUTDOOR PROJECTS ONLY**. VOLUNTEERS WILL NOT ENTER ANY HOME SITES ON SEPTEMBER 10, 2021. THANK YOU FOR YOUR UNDERSTANDING AS WE CONTINUE THIS ANNUAL EVENT TO THE BEST OF OUR ABILITY.

NAME OF RESIDENT/INDIVIDUAL: _____

DOES INDIVIDUAL/RESIDENT HAVE ANY SPECIAL NEEDS THAT VOLUNTEERS NEED TO BE AWARE OF?
(I.e. hearing impaired, wheelchairs, etc.)? _____ YES _____ NO

IF YES, PLEASE DESCRIBE: _____

ADDRESS OF JOB SITE: _____

DIRECTIONS TO THE HOME (MANDATORY FOR ALL OUT OF THE WAY HOMES & ALL CLOUDCROFT HOME JOB REQUESTS):

INDIVIDUAL'S PHONE NUMBER: _____ IF NO PHONE, OTHER CONTACT: _____

REFERRED BY: _____ FROM: _____

DESCRIPTION OF JOB(S) NEEDING DONE: (PLEASE LIST BY PRIORITY): **OUTDOOR PROJECTS ONLY**

- 1) _____
- 2) _____
- 3) _____
- 4) _____

DOES THE JOB REQUIRE SPECIAL EQUIPMENT? _____ NO _____ YES _____

Home Owner must provide special equipment for project to be completed during the Day of Caring

DO YOU HAVE THE MEANS TO COMPLETE THE JOB YOURSELF (I.E. FAMILY MEMBERS IN AREA OR FINANCIALLY)? _____ YES _____ NO

IF YES, WHY IS HELP BEING REQUESTED? _____

IF NOT THE HOUSEHOLD RESIDENT, DOES THE INDIVIDUAL KNOW YOU HAVE PUT IN A JOB REQUEST FOR ASSISTANCE?
_____ YES _____ NO

IS THE INDIVIDUAL IN NEED OF ASSISTANCE A VETERAN? _____ YES _____ NO

WILL YOU BE HOME ON SEPTEMBER 10th, 2021? _____ YES _____ NO IF NOT, WHO WILL BE? _____

30 Years of Caring! 1991 - 2021

**PLEASE RETURN THIS FORM AS SOON AS POSSIBLE
BUT NO LATER THAN FRIDAY JULY 16, 2021
(ALL JOB REQUESTS MUST BE DELIVERED OR POSTMARKED BY THE ABOVE DATE, NO EXCEPTIONS)**

PLEASE READ THE FOLLOWING VERY CAREFULLY
APPLICATION MUST BE SIGNED BY HOME OWNER TO BE CONSIDERED

ALL RESIDENT/INDIVIDUALS REQUESTING WORK TASKS SHOULD SUPPLY **ALL TOOLS AND MATERIALS** THAT WILL BE NEEDED BY VOLUNTEERS TO ACCOMPLISH THE JOBS.

This organization and any volunteer(s) that participate in the DAY OF CARING have the right to refuse to do any work that may cause personal injury, damage to property or for any other reason(s) the volunteer(s) deem necessary.

Residents/Individuals that are requesting to have jobs done by the volunteers on the DAY OF CARING must be fully aware that any work that is accomplished will be done in the most professional manner and to the best of the volunteer's ability. VOLUNTEERS & THIS ORGANIZATION ARE NOT LIABLE FOR WORK THAT MAY NOT MEET THE EXPECTATIONS OF THE RESIDENT(S)/INDIVIDUAL(S).

ADDITIONALLY, PLEASE NOTE THAT ALL WORK IS DONE BY VOLUNTEERS & WHILE EVERY ATTEMPT WILL BE MADE TO ENSURE THEY ARRIVE, THIS ORGANIZATION CANNOT BE HELD RESPONSIBLE FOR NO-SHOWS.

The following jobs are acceptable projects for the volunteers:

- Painting
- Lawn Care
- Wood cutting
- Tree Trimming, ONLY if tree is not taller than the roof
- This list is not exclusive and jobs will be approved on a case-by-case basis

The following jobs are not acceptable jobs for the volunteers on the Day of Caring (no expectations):

- Any job that requires volunteers to enter a residence will NOT be approved
- Tree trimming if the tree is taller than the roof
- Wheel-Chair Ramps or ramps of any sort
- Roof work
- Any major projects requiring more than one-day worth of work
- Any job that would put our volunteers in harm's way
- This list is not exclusive and jobs will be approved/evaluated on a case-by-case basis.

Each job request will require an inspection by the Day of Caring Committee to determine if the job is something our volunteers are able to accomplish. Residents will know on the day of the inspection if they are approved or disapproved. Not all jobs will start in the a.m. some may not begin until after lunch depending on the amount of work that needs to be accomplished & number of jobsites. Please note that all jobsites must be inspected before September 1, 2021; jobs that are not inspected will not be completed on the event date of September 10, 2021.

If you have any further questions, please contact Stephanie Hale, Executive Director at (575) 437-8400 or stephanie@letsthrevenm.org or P.O. Box 14, Alamogordo, NM 88311

I HAVE READ THE FORM (FRONT & BACK) AND UNDERSTAND THIS AGREEMENT.

Resident Signature

Date