



Joplin Mission Trip
November 14 – 18, 2011

**An informational meeting will be held Wednesday, October 19,
at 7:00 pm in Room 508.**

Team Leader: Jerry Kemple

Cost: \$100 (due by Nov. 1) Make checks out to "First Baptist Church"

Projects: Sheet rocking primarily. Some other projects are available for those who want to come but are not able to help with sheet rocking. We do need a couple of people to be in charge of meal preparation.

Lodging: Wildwood Baptist Church (bunk beds provided along with indoor bathrooms and outdoor shower stalls)

Meals: All meals are included in your \$100 except for two meals on travel days. Breakfast and dinner will be prepared by our team and lunch will be provided by work partners at the site.

Requirements:

1. A current Tetanus Shot
2. A completed Volunteer Waiver Form from AmeriCorps
3. A completed Release Form from First Baptist Church
4. A completed Medical Release Form from First Baptist Church

Additional Information: Other than the two fast food meals, the only other out-of-pocket expense you will have on the trip is fuel. At the end of the trip, we will divide the fuel cost among participants. We estimate \$15-25/person.

If you have any questions about this trip, please contact Jerry Kemple at 636-7969 or Melissa Hatfield at 634-3603 or melissa@fbcic.org.

www.fbcjcmissions.org

RELEASE AND DISCLAIMER OF LIABILITY
First Baptist Church, Jefferson City, MO



I, _____, in consideration of the benefits derived from my participation in the short-term mission trip to **Joplin, MO, November 14 - 18, 2011**, and the permission and agreement for me to take part in this trip which is administratively organized and sponsored by the First Baptist Church, Jefferson City, do hereby voluntarily release, acquit, and forever discharge the First Baptist Church, Jefferson City, and its employees and volunteers from all manner of suits, actions, claims, demands, and liabilities which may arise from my participation in this trip.

I recognize that there are certain health risks as well as other risks to my property and me and I enter into participation in this trip with knowledge of those risks.

I understand that this document constitutes a full and complete waiver of all possible claims including claims for negligence in personal injury or property damage, arising out of my participation in this trip. This Release and Disclaimer shall be applicable for any dates which might extend beyond the original dates for the trip due to delays resulting from political, weather, illness or other conditions caused by circumstances and events beyond the control of the First Baptist Church, Jefferson City, and her employees and volunteers.

No provision of this document shall in any way, limit my right to make claims against persons other than the First Baptist Church, Jefferson City, and her employees and volunteers.

___ I have fully read and understand this Release and Disclaimer.

Emergency Contact:

Name _____ Number _____

Relationship to You _____

Medical Information:

Insurance Provider _____

Policy Number _____ Contact Number _____

Known Allergies _____

Current Medications _____

Any other information we should know in the event of a medical emergency:

Signature _____ **Date** _____

Joplin Tornado May 2011

VOLUNTEER RELEASE AND WAIVER OF LIABILITY

AmeriCorps Joplin Emergency Response Team, Individual, and Group Volunteers

PLEASE READ CAREFULLY. THIS IS A LEGAL DOCUMENT THAT AFFECTS YOUR LEGAL RIGHTS.

This Release and Waiver of Liability, executed on (date) _____, by (volunteer's name) _____, in favor of AmeriCorps St. Louis, Jasper/Newton County, Joplin City, and their partner organizations, directors, officers, members and affiliates (herein referred to as "Storm Recovery Task Force").

I, the volunteer, desire to work as a volunteer for Americorps St Louis and engage in activities, as coordinated by Americorps St Louis, related to being a volunteer. I understand that such activities may include, but not limited to, tree and debris, application of tarps, distribution of goods, EMT and other medical work, work around chainsaws and other power equipment, etc. I freely and voluntarily execute this Release under the following terms.

1. **RELEASE AND WAIVER.** I hereby release and forever discharge Americorps St Louis from any and all liability, claims and demands of whatever kind either in law or in equity, which arise or may hereafter arise from my activities with Americorps St Louis. I understand that this Release discharges Americorps St Louis from any liability or claim that I may have against Americorps St Louis with respect to bodily injury, personal injury or property damages that may result from my activities with Americorps St Louis. I also understand that Americorps St Louis does not assume any responsibility for or obligation to provide financial or other assistance, including but not limited to medical, health, auto or disability insurance in the event of injury or loss.

2. **MEDICAL TREATMENT.** I hereby release and forever discharge Americorps St Louis from any claim which arises or may arise on account of first aid, treatment or any service rendered in connection with my volunteer activities with Americorps St Louis.

3. **ASSUMPTION OF RISK.** I understand that my volunteer activities may include work that is hazardous, including but not limited to work around power tools, heavy machinery, as well as transportation to and from the work site. I hereby expressly assume the risk of injury or harm in the volunteer activities.

4. **INSURANCE.** I understand that Americorps St Louis does not carry or provide health, medical, disability or auto insurance coverage for any emergent volunteer. Each volunteer is expected and encouraged to obtain his or her own medical, health, disability and auto insurance.

5. **PHOTOGRAPHIC RELEASE.** I hereby grant unto Americorps St Louis all rights to any and all photographic and video images made during my service to Americorps St Louis for internal use or reasons of publicity.

6. **OTHER.** I agree that this Release and Waiver is intended to be as broad and inclusive as permitted by local and state laws. I agree that in the event that any provision of this release shall be held to be invalid by any court of competent jurisdiction, the invalidity of such provision shall not otherwise affect the remainder of the Release and Waiver, which shall continue to be held enforceable.

Volunteer signature: _____ Date: _____

Parent or guardian signature: _____ Date: _____
(for volunteers under the age of 18)

Drivers License # _____

Organization: _____

Emergency Contact Information

Contact person: _____

Relationship to volunteer: _____

Contact phone number: _____ Secondary number: _____

Collected by: _____ **on** ____/____/____ **at** _____ **am/pm**