Tennessee Baptist MISSION BOARD
6434 John Hagar Road, Mt. Juliet, TN 37122 (615) 371-7926

DISASTER RELIEF TENNESSEE

Disaster Relief Volunteer – Adult Application

*Includes Disaster Relief Credentialed and **Non-Credentialed Volunteers***

Full Name: _____ Sex: ☐ Male ☐ Female
(As it appears on your driver's license)

Preferred Name: _____ Day Phone: (___) _____ Evening Phone: (___) _____ Cell Phone (___) _____
(For badge purposes)

Ordained Minister: _____ Licensed Minister: _____ Retired: _____
(Date) *(Date)* *(Date)*

Email Address: _____ Spouse First Name: _____

Mailing Address _____ City_____ State _____ ZIP Code_____

Church Membership: _____ Church City: _____Association: _____

Last 4 digits of Social Security Number: _____ Languages spoken in addition to English: _____

Professional skills: ☐ Nurse ☐ Physician ☐ Legal ☐ Business/Financial ☐ Other: _____

Specific skills that I have: _____

Current Passport? ☐ Yes ☐ No Exp. Date: _____ Available for overseas assignments? ☐ Yes ☐ No

Current Employment: ☐ Actively Employed ☐ Self-employed ☐ Retired ☐ Other: _____

Experience in this type of ministry: _____

EMERGENCY CONTACT INFORMATION:

Contact Name: _____ Relationship to you: _____

Phone #1 (___) _____ Email Address: _____

REFERENCES: Provide name of references, phone numbers, email, and how the references know you.

Character Reference: (unrelated to you) Name: _____ Email: _____

Phone #1 (___) _____ Phone #2 (___) _____ How Known: _____

Ministerial Reference: (pastor or staff) Name: _____ Email: _____

Phone #1 (___) _____ Phone #2 (___) _____ How Known: _____

Disaster Relief Office Use Only: **NCV: ____Yes ____No**
Expires 3 years from date of issue.

Cash: _____ Check #: _____ PAID: _____ $40.00 (for New or Renewal)

Safety Class taken: Date_____ Instructor:_____

Unit Assigned to:_____ Team Leader:_____

Non-credentialed Applications must be submitted to the DR Office **BEFORE** volunteer leaves on assignment.

A. Lifestyle Considerations: *Please read the following information very carefully. It is extremely important for you to understand the responsibilities and lifestyle expected of a Disaster Relief Volunteer.*

The unique and special nature of Tennessee Baptist Mission Board (TBMB) requires all volunteers associated with TBMB to manifest conduct and actions that project an image consistent with the expressed purpose and mission of TBMB. Conduct or actions that are perceived as inconsistent with the belief and values of Tennessee Baptists are unacceptable. Examples of such conduct are involvement with alcohol, illegal drugs, harassment of any kind, or sex outside the marriage relationship between a man and a woman.

1. Do you have, or have you had, any lifestyle, conduct, or activity that would project an image which could be reasonably seen as inconsistent with these expectations? ☐ YES ☐ NO
2. Have you ever been convicted of a misdemeanor or felony? ☐ YES ☐ NO
3. Have you ever been convicted of child abuse or a crime involving actual or attempted sexual molestation of a minor or contributing to the delinquency of a minor? ☐ YES ☐ NO
4. Are you currently under any investigation or pending charge? ☐ YES ☐ NO

   If you answered "yes" to question(s) 1, or 2, or 3, or 4, please, elaborate:

5. Do you currently use any of the following?
   - A. Alcohol ☐ YES ☐ NO
   - B. Tobacco Products ☐ YES ☐ NO
   - C. Illegal Drugs ☐ YES ☐ NO

   If you answered "Yes" to letter(s) A and/or B, would you be willing to forgo your personal use of these items during your time of volunteer service? ☐ YES ☐ NO
6. Do you have any physical or mental health condition(s) or impairments(s) that could limit you from performing Disaster Relief work? ☐ YES ☐ NO

   If "yes", please explain and indicate what type of accommodations might be made to enable you to perform the ministry.

B. Disaster Relief Volunteer's Responsibility

As a volunteer in Disaster Relief with Tennessee Baptist Mission Board (TBMB), I understand that during my service with TBMB, I am expected to recognize and abide by the following:

1. TBMB is a Christian organization. Volunteers are expected to conduct themselves in a manner that would honor Jesus Christ. Volunteers are expected to treat each other, those they work with, and those that they are ministering to with respect and care. Volunteers must be careful not to use words and actions that would disrespect others. They must respect the property of others. Failure to do so may result in being asked to leave the ministry site.
2. Volunteers in Disaster Relief must be prepared physically, spiritually and mentally to serve in the chaos of a disaster event.
3. The use of alcohol or illegal drugs in the ministry area is strictly forbidden.
4. Generally, volunteers are responsible for bearing their own expenses during the ministry. This may include: travel to and from the ministry site, food, lodging, and incidental expenses.
5. **Volunteers are responsible for having their own Medical Insurance. No insurance of any kind is provided to volunteers.** Volunteers are encouraged to purchase special trip insurance for each deployment.
6. Volunteers may not attempt to charge for any work done or seek to enlist personal jobs in the future.
7. Volunteers must be careful not to promise future help or assistance to individuals or groups.
8. Volunteers must have appropriate clothing for the ministry site. Generally, this means long pants (or ¾-length pants for women), closed toed shoes (no flip flops or sandals). Work boots are best. All clothing must be conservative and respectful of community norms (no tank tops, halters or strapless tops).

9. Volunteers are expected to conduct themselves in a safe manner including the prudent use of Personal Protective Equipment (PPE). Volunteers must attend any required safety briefing and inform unit leader of any physical limitations or illness that may impact their work or the work of their team.
10. Maintain current (1) address and phone number, (2) availability status, (3) skills and abilities with team leader and Disaster Relief office.
11. Assist with unit preparation, training events, and non-emergency use of the unit, as personal availability and ability allow.
12. Authorize background checks and screenings, as required, and pay a credentialing and training fee every three years to remain active.

C. Affirmations

By my signature placed below, I affirm that I have read, understood, and agreed to make the following affirmations.

1. **I agree and commit to conduct myself, share my faith, and interact with others in a manner consistent with and not contrary to the principles of Tennessee Baptist Mission Board and the theological principles and doctrines as presented in the *Baptist Faith and Message*, most recently adopted by the Southern Baptist Convention and affirmed by the Tennessee Baptist Convention.**
2. **I understand** that until I have completed the "Introduction to Southern Baptist Disaster Relief" class, a specialized class, successful background screenings; satisfied background and reference checks, and paid my credentialing fee, that I am considered a "Non-Credentialed Volunteer" and can only be assigned restricted duties under the close supervision of a unit director.
3. **I understand** TBMB does not carry insurance to cover volunteers for medical needs or injuries during their term of service. Therefore, every volunteer is expected to have insurance in case of accident, injury, or illness. Furthermore, I understand that personal liability is the responsibility of the volunteer.
4. **I affirm** that I have read, understood, and agree to fulfill the lifestyle required of a TBMB Volunteer.
5. **I affirm** that the information provided in this volunteer application is true and complete. I understand that, if I am accepted for volunteer service, any false information or omissions will affect my continued eligibility for consideration, service and/or participation without any obligation or liability whatsoever. I agree to immediately notify TBMB if I should be convicted of or charged with a felony, or any crime involving dishonesty or a breach of trust, or any change or occurrence that alters any of the information contained within the application, while my volunteer application is pending, or after my application has been approved.
6. **I authorize** the investigation of all statements contained in this application.
7. **I authorize** any person, church, school, current employer, past employer(s) and organizations that might know of my qualifications for volunteer service to provide TBMB with relevant information and opinion that may be useful to TBMB in making a decision, and I release such persons and organizations from any legal liability in making such statements.

Release

Warning: By signing this release you are waving and releasing legal rights which you may have.

Volunteer Status

I desire to volunteer with Tennessee Baptist Mission Board (TBMB) to provide volunteer services and engage in the activities related to this ministry. I hereby agree to donate and offer my personal services and labor, free of charge. I understand and agree that I will not be acting as an employee of and I will not be entitled to any wages, compensation, or benefits associated with my service from TBMB. I understand that neither TBMB nor any other Releasee under this agreement assumes any responsibility or obligation to provide financial or other assistance to me.

Ministry Description

I understand that Tennessee Baptist Mission Board through Tennessee Baptist Disaster Relief sends personnel and equipment into areas impacted by natural and man-made disasters. Routine ministries include preparation and service of meals, tree cutting and removal, flood clean up and sanitation, childcare, roof repair, fire recovery, shower and laundry services, light construction, construction rebuild, and other similar work. Volunteers will normally be housed in gymnasiums and churches, sleeping on the floor, and working in extreme conditions, with various degrees of sanitation, electricity, and other normal living conditions available.

Potential Risks

I understand that my participation in this ministry may involve risk of injury to myself and even my death. I understand these risks may include, but are not limited to, risks associated with travel, transportation in commercial and other vehicles, moving and lifting heavy objects, working with and around dangerous equipment, cooking and serving food, and working and living in environments which may be toxic and without power, normal sanitation, and access to immediate medical care, including the potential for contracting contagious diseases such as the COVID-19 virus in an environment where proximity to other people is a natural part of the ministry activity. These risks exist because of the activity itself and/or the content of the program (e.g., the hazards of depending on other people) or those created by acts of God.

Assumption of Risk

For and on behalf of myself, my heirs, administrators, executors, and next of kin and in consideration of my being allowed to participate in this ministry, I hereby expressly and specifically assume all the risks of injury and harm associated with my participation.

Indemnification and Release of Liability

I do further hereby release and discharge from liability and agree to defend, indemnify, and forever hold harmless all other participants and volunteers engaged in any Disaster Relief or Construction Rebuild project that I participate in, Tennessee Baptist Mission Board, The Tennessee Baptist Convention, the Southern Baptist Convention and those corporations of 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 state conventions and associations, and the members, volunteers, employees, servants, agents, officers, and directors of all these entities, herein collectively referred to as Releasees, from any and all causes of action arising from or relating to my participation in these services, including but not limited to travel, lodging, transportation, or on account of first aid or other medical treatment rendered by Releasees, for damages or injuries 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 one or more of the 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 loss resulting from any source or cause.

Publication Release:

I understand that during this ministry Activity, one or more of the Releasees (or its agents or designees) may be photographing or shooting video footage of the activity and that I may be photographed or included in a video shot. I hereby give the Releasees and parties designated by them permission to photograph me for commercial purposes and agree to the following: 1) being photographed by any means; 2) commercial or any other use of my likeness without compensation; 3) specifically waiving all rights of privacy during the photographing. Furthermore, I hereby give the Releasees and parties designated by them including clients, licensees, purchasers, agents, publishers, and periodicals, the irrevocable right to use my name and/or photograph/video image for sale or reproduction in any print or electronic medium for purposes of advertising, trade, display, exhibition, competitition, or editorial use.

Public Health Safety:

After signing this release but prior to serving, if I become symptomatic with contagious diseases such as COVID-19, I understand I am to communicate that immediately to my church's leadership and cancel my participation at this activity. During service, if I become symptomatic, I understand that I am to communicate that immediately to leadership on site and to avoid further contact with others on site. I commit myself to leave as soon as possible to avoid jeopardizing others and procuring medical attention for appropriate follow up.

Adult Verification:

I verify that I am at least 18 years of age when signing this document and therefore, an adult. ☐ YES ☐ NO

By signing in my own handwriting or typing my name below using electronic means, I affirm I have read, understood, and agreed to its terms, and have effectively signed the application.

Signature: _____ **Date:** _____