



Service Project Request

Name:		Date of Birth:
Telephone Number:	Marital Status:	
Street Address with Apartment Name and Number, or Subdivision Name:		
City & State:	ZIP Code:	
Do you have a legal guardian or conservator? Yes / No	Telephone:	
If yes please complete: Name	Please check the following that best describes your annual income: <input type="radio"/> Above \$21,400 <input type="radio"/> Below \$21,400 Source of Income:	
Please list priority <i>exterior projects</i> requested:		
Will supplies be provided by applicant? Yes / No (If no, please list supplies needed.)	May SOS committee contact applicant directly? Yes / No Have you been referred by a local agency? Yes / No If yes, please provide: Agency Name: _____ Contact Person: _____ Telephone Number: _____	

PLEASE FILL OUT BACK OF FORM

RELEASE AND WAIVER OF LIABILITY

In consideration for receiving permission to participate in the **Serving our Seniors / SOS program (the activity)**, I RELEASE, WAIVE, DISCHARGE AND COVENANT NOT TO SUE, The Woodlands Religious Community, Inc., a Texas non-profit corporation, doing business as Interfaith of The Woodlands and its board members, officers, employees and agents (referred to herein as the "Released Parties") from any and all liability, claims, demands, actions and causes of action whatsoever arising out of or related to any loss, damage, or injury, including death, that may be sustained by me, or any of my property, WHETHER CAUSED BY THE NEGLIGENCE OF THE RELEASED PARTIES, or otherwise, while participating in the Activity, or while in, on or upon the premises where the Activity is being conducted.

I elect to voluntarily participate in the Activity with full knowledge that the Activity may be hazardous to me and my property. I VOLUNTARILY ASSUME FULL RESPONSIBILITY FOR ANY RISKS OF LOSS, PROPERTY DAMAGE OR PERSONAL INJURY, INCLUDING DEATH, that may be sustained by me, or any loss or damage of property owned by me, as a result of being engaged in the Activity, WHETHER CAUSED BY THE NEGLIGENCE OF THE RELEASED PARTIES OR OTHERWISE.

I further hereby AGREE TO INDEMNIFY AND HOLD HARMLESS the RELEASED PARTIES from any loss, liability, damage or costs, including court costs and attorney's fees, that they may incur due to my participation in the Activity, WHETHER CAUSED BY NEGLIGENCE OF THE RELEASED PARTIES or otherwise. IT IS MY INTENT TO RELEASE EACH OF THE RELEASED PARTIES FROM THE CONSEQUENCES OF HIS OR HER OWN NEGLIGENCE.

It is my express intent that this waiver of liability and hold harmless agreement shall bind the members of my family and spouse, if I am alive, and my heirs, assigns and personal representative, if I am deceased, and shall be deemed as a RELEASE, WAIVER, DISCHARGE AND COVENANT NOT TO SUE the RELEASED PARTIES.

I hereby authorize and give permission to Interfaith of The Woodlands to publish any photographs taken of me for use in Interfaith of The Woodlands printed publications, social media platforms and website. I acknowledge that since my participation is voluntary, I will receive no financial compensation. I further agree that my participation in any publication, social media platforms and website produced by Interfaith of The Woodlands confers upon me no rights of ownership whatsoever. I release Interfaith of The Woodlands for any claims by me or any third party in connection with my participation.

THIS IS A RELEASE OF LEGAL RIGHTS. BE CERTAIN YOU READ AND UNDERSTAND THIS RELEASE BEFORE SIGNING IT.

I HAVE READ AND UNDERSTOOD THIS DOCUMENT AND MY SIGNATURE EVIDENCES MY INTENT TO BE BOUND BY ITS TERMS.

Name (please print)

Signature

Date

ANTI-HARASSMENT POLICY

It is Interfaith of The Woodlands policy to maintain a working environment which encourages mutual respect, promotes respectful and congenial relationships between employees, volunteers and service recipients that are free from all forms of harassment.

All reported or suspected occurrences of harassment will be promptly and thoroughly investigated. Where harassment is determined to have occurred, the Agency will immediately take appropriate action.

This policy refers to, but is not limited to, unlawful harassment and discrimination in the following areas: 1) age, 2) race, 3) color, 4) national origin, 5) religion, 6) sex, 7) sexual orientation, 8) marital status, 9) handicap, and 10) veteran status.

DEFINITIONS

Verbal harassment includes racial, sexual, or ethnic jokes and insults. Physical harassment includes unwelcome touching, grabbing, and pinching.

Visual harassment includes sexually suggestive pictures, posters, photographs, or cartoons, or other materials intended to reflect negatively on an individual's race, national origin, ancestry, religion or sexual preference.

Sexual harassment includes unwelcome sexual advances, sexual remarks, requests for sexual favors, or the creation of an intimidating or hostile work environment demeaning to an individual because of his or her sex or sexual preference. Sexual harassment undermines the employment relationship by creating an intimidating, hostile, or offensive work environment and will not be tolerated.

ANTI-HARASSMENT POLICY RECEIPT ACKNOWLEDGEMENT

I _____, have received and read a copy of the Interfaith of The Woodlands Anti-Harassment Policy. I agree to abide by this policy and assist Interfaith of The Woodlands in maintaining a harassment free environment.

Name (please print)

Signature

Date

Please Return by September 9, 2022

Please return this request by mail, fax or e-mail to:

Interfaith of The Woodlands

Attn: **Sarah Mundy, Program Supervisor**

4242 Interfaith Way

The Woodlands, TX 77381

281-367-1230

smundy@woodlandsinterfaith.org

Fax 281-292-3223