

# Gilmer Relief and Service Project 2022; June 19-12

GRASP is a ministry of Ellijay First United Methodist Church and all other churches that unite to help!

## ADULT REGISTRATION FORM

Home Church: \_\_\_\_\_

Name: \_\_\_\_\_ Phone (h): \_\_\_\_\_ Phone (c): \_\_\_\_\_

Address (Street, City, State, & Zip Code): \_\_\_\_\_

Email: \_\_\_\_\_ Age: \_\_\_\_\_ Gender: M / F T-shirt size: S M L XL XXL

Please send you registration and check to reserve your spot for GRASP 2022:

GRASP EFUMC  
75 McCutchen St.  
Ellijay, GA 30540

GRASP Adult Price - \$25 (payment deadline on or before May 20th)

Please circle one answer for each question:

Are you 21 years of age or older?  
YES or NO

If yes, would you consider using your vehicle to aid  
in the transport of GRASPERS and equipment to  
the worksites?  
YES or NO

### HEALTH INFORMATION:

Please COPY OF YOUR INSURANCE CARD and  
place copy on this template.

### **REQUIRED FOR EVERYONE AT GRASP**

If you have special medical conditions, please make a  
note of it on the back of this form

Only fill  
out these  
questions if  
you  
answered  
YES to the  
two  
questions  
above.



Type of vehicle you will be using at GRASP: \_\_\_\_\_

Number of passengers that you can carry: \_\_\_\_\_

Driver's license number: \_\_\_\_\_ State: \_\_\_\_\_

Auto insurance company: \_\_\_\_\_ Policy #: \_\_\_\_\_

Can you carry your work group tools? \_\_\_\_\_

DO YOU HAVE SPECIAL SKILLS OR TALENTS THAT WOULD BE USEFUL ON WORKSITES?

(Circle as many as apply)

Minor construction, repair

Roofing, repair

Yard work

Major construction,  
building/replacing

Pressure washing

Chain saw work

Electrical

Landscaping/flower planting

Vinyl laying/repair

Fence building

Cleaning

Plumbing, repair/replace

Painting, inside

Other \_\_\_\_\_

Screens, repair/replace

Painting, outside

(Continued on back)

DO YOU HAVE SPECIALIZED TOOLS FOR THE ABOVE CATEGORIES? IF YOU WILL BE WILLING FOR YOUR GROUP TO USE THEM, THEN PLEASE BRING THEM WITH YOU. WE WILL GIVE YOU PRIOR NOTICE, IF POSSIBLE, ABOUT THE ITEMS YOU MIGHT NEED.

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### Release of Claim Form

The following are guidelines for all participants. Participants are here to provide service, helping others just as the disciples of Jesus Christ did. It is extremely important for each participant to be willing to adjust to the expectations of the Gilmer Relief and Service Project. Therefore, in consideration of the opportunity to participate in GRASP as a volunteer, and its consideration of the other obligations incurred by the mission organization, please review the following agreement and sign below:

- I agree to share my faith in an appropriate Christian manner.
- I agree to cooperate at all times with the GRASP leaders, my group leader and my team members concerning our work and life together- including daily assignments, food, lodging and transportation.
- I agree to fully commit my time and effort to the GRASP mission every day.
- I agree to abstain from offensive habits while during the mission.
- I agree to abide by the rules and regulations set up by GRASP and to always follow the rule of safety first.
- Further, I hereby release and discharge the mission organization which assisted in these arrangements, their agents, employees and officers: from all claims, demands, actions, judgments and executions which I ever had, or now have, or may have, or which my heirs, executors, administrators or assigns may have or claim to have, against the mission organizations, their agents, employees and officers and their successors or assigns for all personal injuries to property, real or person, caused by, or arising out of, the GRASP mission service. I intend to be legally bound by this statement.
- I hereby acknowledge that by engaging in this mission, I may have my picture made and may be videotaped by the organization and those pictures and footage may be used to promote GRASP in various ways.
- I hereby acknowledge that by engaging in this mission, I am subjecting myself to certain risks voluntarily, including and in addition to those risks which I normally face in my personal and business life, including but not limited to such things as health hazards due to poor food and water, diseases, pests and poor sanitation; potential danger from lack of control over local population; potential injury while working; and inadequate medical facilities, etc.
- I hereby grant permission for first aid, non-prescription medication or emergency medical treatment to be administered if the need arises.

#### **A Special Note Regarding Participation in GRASP 2022 & COVID 19:**

***Under Georgia law, there is no liability for an injury or death of an individual entering these premises if such injury or death results from the inherent risks of contacting COVID-19. You are assuming this risk by entering these premises.***

The validity, construction and interpretation of this Release of Claim form shall be governed and construed in accordance with the domestic law of the state of Georgia.

In witness whereof, I have executed this agreement and this release on this \_\_\_\_\_ day of \_\_\_\_\_, 2022.

Signature of GRASP participant: \_\_\_\_\_

Please fill out all information as accurately as possible and return form with registration money. We look forward to serving with you for GRASP 2022!

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