



## North Alabama United Methodist Disaster Recovery Team Registration Form

*In order to schedule a trip, please fill out this form and return it to our  
Disaster Recovery Volunteer Coordinator  
either by email [lfeist@umcna.org](mailto:lfeist@umcna.org) or fax, 205-226-7945*

Date Submitted: \_\_\_\_\_  
 Total # of Volunteers: \_\_\_\_\_  
 Contact Name: \_\_\_\_\_  
 Church/Organization: \_\_\_\_\_  
 Denomination/Group: \_\_\_\_\_

Jurisdiction: \_\_\_\_\_ Conference: \_\_\_\_\_ District: \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Telephone Home: \_\_\_\_\_  
 Telephone Work: \_\_\_\_\_  
 Telephone Cell: \_\_\_\_\_

E-mail address: (please print legibly) \_\_\_\_\_

Estimated number of persons on the team:  
 # Youth: \_\_\_\_\_ #Adults: \_\_\_\_\_ #Male: \_\_\_\_\_ #Female: \_\_\_\_\_

Available Dates:  
 Arrival: \_\_\_\_\_ Departure: \_\_\_\_\_ Work Dates: \_\_\_\_\_

1. Has your Mission building team served on a previous trip? Yes \_\_\_\_\_ No: \_\_\_\_\_
2. Do you have a specific work area? Please note: \_\_\_\_\_
3. If the work location is unavailable, are you open to another work area? Yes: \_\_\_\_\_ No: \_\_\_\_\_
4. Have you read through the Volunteer Team Guidebook before registering? **If you have not, please see <http://northalabamaumc.org/pages/detail/1631>. Your answer is consent to the policies provided in the manual.** Yes: \_\_\_\_\_ No: \_\_\_\_\_

### Office Use Only

<b>Site Assignment:</b>	
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<b>Leader Notified:</b>	Date:	Phone:	E-mail:
<b>Worksite Information sent:</b>	Date:	E-mail	Regular Mail

Notes: