

Volunteer Regulations

Date Project: _____
Name, Surname: _____ Date of Birth: _____
Address: _____ Passport Number: _____
Postcode, City: _____

As a volunteer in the Tsunami HANDAID volunteer project (herewith named the project) I agree to the following conditions:

1. My sole purpose in this project is to assist in the construction of the buildings selected for this year's project.
2. I take over full responsibility for the costs of air travel, food, accommodations, transport, insurances (incl. health insurance) and health costs (such as vaccination, etc.) and all other personal costs that might arise during the journey for the project.
3. I confirm that I am healthy and capable of performing hard physical work.
4. I confirm that I have adequate insurance coverage, both for accidents and illnesses, throughout the entire trip. The coverage includes repatriation in case of emergencies (Note: if you live in Switzerland, a membership with www.rega.ch is advisable).
5. I confirm that I have adequate funds and that I can access them in an appropriate manner (banks, ATMs etc. might not be available in the affected area). I also confirm that it is my own responsibility to arrange payment for outstanding bills in the event of loss of credit card etc.
6. My political attitude towards the government of the host country or any other political association will be neutral at all times during the whole project.
7. I will respect and act in line with the local traditions (e.g. dress code).
8. It is my responsibility to comply with the immigration requirements of the Philippines (e.g. valid passport, entry visa etc.)
9. I will always follow the guidelines of the Project Manager who will make all key decisions on the building site. During the construction work I will always respect the Project Managers decisions and will not undermine the leadership of the project manager.
10. I confirm that I have familiarized myself as good as possible with the current situation of the affected area. I am aware that working in a devastated town, visiting refugee camps etc. may be challenging physically, emotionally and mentally. I do not hold Tsunami HANDAID responsible for these challenges or the effect they might have on me.
11. I agree that photos taken of me (and others) during the work day or during leisure time may appear on the Tsunami HANDAID homepage.
12. Tsunami HANDAID Association is not responsible for my health, safety and security during my participation in the project.

I hereby confirm with my signature that I have read and that I agree with the above mentioned guidelines.

Date and Signature Project Participant: _____

Date and Signature Date Project Manager: _____

Please provide the information on page 2, including the requested attachments.

VOLUNTEER INFORMATION SHEET

Particulars Copy of Passport (valid 6 months beyond the date of travel) enclosed.

Name, Surname: _____

Full Address: _____

Phone Number: _____ Email: _____

Contact person in case of emergency

Person 1: _____

Full Address: _____

Phone Number: _____ Email: _____

Person 2: _____

Full Address: _____

Phone Number: _____ Email: _____

Medical and Repatriation Insurance Copy of the medical insurance enclosed.

Name, Phone Number: _____

Address: _____

Policy Number: _____

Allergies

What kind of allergies? Measures?

Medications

Name of medication? How to administer?

Vaccination Copy of the vaccination card enclosed.

Date and Signature Project Participant: _____