



Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Marital Status:  Single  Married Spouse's name: \_\_\_\_\_

Partners in Hope (PIH) is a Lake Travis community ministry that connects people who desire physical, emotional and spiritual help with people who will help.

### Release

- I agree that I will not hold Partners in Hope or its volunteers responsible for any claims associated with the work done at my home or in the delivery of service to me or to my family.
- As part of my alignment with Partners in Hope, I may be asked to
  - Meet with additional community members, ministries and resources (in person, by phone, or video call) for my benefit and that of my family
  - Participate in fellowship activities promoted by PIH as I am able.
  - Read *God Will Use This for Good* booklet and discuss with a PIH staff member.
  - Work with PIH to find ways I can serve in the community.

\_\_\_\_\_ I give Partners in Hope the authority to share my information with community partners like Crisis Ministries and other volunteers when needed.

\_\_\_\_\_ I give permission for my image and that of my family to be used by PIH on their website, social media pages and other media.

\_\_\_\_\_ I agree that, if I receive assistance of any kind from Partners in Hope, the monetary amount or value is not to be disclosed to anyone outside my immediate family. I understand that this release does not constitute a guarantee of any assistance.

\_\_\_\_\_  
Your Signature and Date

\_\_\_\_\_  
PIH Staff Signature and Date