Registration for Weatherization First Volunteer

Date:			
Name:			
	Address:		
	Phone Number:	Mobile phone:	
	Email:		
	Congregation or Organization (optional):		
We ser	ve households in Centre County. Are there geogr	raphic limits to where you want to work?	
	re best dates and times for weatherization work: e when you are NOT available.	Weekend, weekday, after work during the week, et	c. Also
Are the	re any special skills that you can offer to this wor	k?	
Are you	u willing to serve as a project leader?		
membe registra	er of PA IPL, please go to the website and join. $\underline{\mathbf{w}}$	Pennsylvania Interfaith Power & Light. If you are nowww.paipl.org. Or include a check with dues with this are \$10, but any amount is gratefully accepted and w	•
Although we do not anticipate any safety risks, accidents may happen. With your signature below, we ask you to acknowledge the possibility of such risks and to certify that you will not hold Pennsylvania Interfaith Power & Light, its officers, members, or volunteers liable for any injuries that may occur. With your signature, you are also acknowledging that you will not hold the homeowner, renter, or landlord in whose home you are working liable for any injuries that may occur. In addition, you acknowledge that you will respect the residents for whom we are providing these services, as well as their property, and that you will maintain strict confidentiality about anything you may see or hear while you are in the residents' homes.			
Signatu	re of Volunteer		
Witnes	s Signature		
Cl		1 1: :6 1 1)	

Send completed registration form (along with check for membership, if needed) to PA Interfaith Power & Light, 243 S. Allen St., #337, State College PA 16801

For more information contact Sylvia Neely at SNeelyPA@gmail.com or call 814-644-9776