PROJECT FORM



Project Number: ____

Assigned by Marc

Camp Cadiz | June 24-27 2019

Please submit COMPLETE	D project form to the Little River Baptist Association or email to			
campcadizky@gmail.com				
	ted for homeowners. We are unable to complete projects for businesses or on propert re planning to list your property for sale in the next year, please do not submit a project ate need.			
Project Recipient:				
Name:	Phone:			
Address:				
Email:				
Does the recipient own th	e home? yes no <mark>(if no, see note above)</mark>			
Submitted By (if differen	nt than recipient):			
Phone:	Email:			
Reason for submittal:				
	e to pay for materials and/or labor to complete job) aged Elderly Other			
Type of Project: No roo	f projects can be completed. Pressure washing decks and sidewalks only,			
no houses.				
New Construction	Construction Repair Painting/Staining Yard Work			
Gutter Cleaning	Other home repairs Household chores Pressure Washing			
Other				
	nal Information:			
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Does the location have an outdoor electric outlet near the project area? Does the location have an outdoor water hydrant near the project area?

All projects are reviewed, evaluated and prioritized by Camp Cadiz Project Leaders. Unfortunately, not all projects can be completed due to insurance regulations, resources and allotted time. The resident must be at home in order for the work to be started/completed. What day and time will the resident **NOT** be home or does **NOT** want the project done?

	Mon 6/24	Tues 6/25	Wed 6/26	Thurs 6/27
Morning (7:30am – 11:30am)				
Afternoon (12:30pm – 3:30pm)				
CAMP CADIZ USE ONLY PLEASE				
Scheduled Date/Time:	E	St. Work Hou	rs:	
Special Tools/Supplies:				

Team Assigned:

Construction	_Yard Work	Gutter Cleaning	Pressure Washing	Painting/Staining
Jack of All Trades	Other			

Project numbers will be assigned by Marc and will need to be written on any receipts of items purchased for that job. Please sign the release on the back of this page.

Resident Release:

I, the undersigned (also known as the resident), agree to and accept all construction or renovation work that is performed on my home (dwelling) by Little River Baptist Association, Trigg County, Kentucky and their representatives. Further, I waive any right to bring legal action against Little River Baptist Association, Trigg County, Kentucky, its licensees, successors, legal representatives and assignees upon completion of said construction or renovation work. I also hereby release all claims and forever hold harmless the directors, employees, and agents of Little River Baptist Association, Trigg County, Kentucky from any and all claims related to work performed on my home (dwelling). I agree that Little River Baptist Association, Trigg County, Kentucky will complete ONLY repairs listed on this form that are started during project week. Little River Baptist Association, Trigg County, Kentucky and their representatives are not responsible for the completion of any repairs listed on this form, which are not started during the project week. By signing this document the resident hereby gives Little River Baptist Association, Trigg County, Kentucky its licensees, successors, legal representatives and assignees, the absolute and irrevocable right and permission to use the resident's name and to use, reproduce, edit, exhibit, project, display, copyright, publish photographic images and/or moving pictures and/or videotaped images of the resident with or without resident's voice, or in which the resident may be included in whole or in part, photographed, taped, videotaped, and/or recorded during the duration of the project, and therefore to circulate the same in all forms and media for art, advertising, trade, competition, of every description *and/or* any other lawful purpose whatsoever. The resident also consents to the use of any printed matter in conjunction therewith.

The resident also waives any right to inspect *and/or* approve the finished product or products or the editorial, promotional, or printed copy of soundtrack that may be used in connection therewith and any right that I may have to control the use to which said product, products, copy and/or soundtrack may be applied.

Please complete and sign below (not valid without signatures): NO WORK CAN BE PERFORMED WITHOUT SIGNATURES OR IF THE RESIDENT IS NOT HOME

Homeowner Signature:	
Camp Cadiz Evaluator Signature:	Date:
Notes/Measurements:	