



Repairing homes, Revitalizing communities, Rebuilding lives

Community Building Application

APPLICANT INFORMATION	
NAME OF ORGANIZATION	
ADDRESS/CITY/ZIP	
EXECUTIVE DIRECTOR OR BOARD CHAIR	
CONTACT PERSON (IF DIFFERENT)	
PHONE	EMAIL
MISSION/PURPOSE OF ORGANIZATION	
PRIMARY SOURCE(S) OF FUNDING	
ANNUAL OPERATING BUDGET	

REPAIR WISH LIST: PLEASE LIST THE FOUR MOST IMPORTANT REPAIRS NEEDED	
1.	
2.	
3.	
4.	

INFORMATION ABOUT YOU
DESCRIBE HOW THESE REPAIRS WILL IMPACT YOUR CLIENTS
DESCRIBE HOW THESE REPAIRS WILL IMPACT THE COMMUNITY

WOULD YOUR STAFF AND/OR CLIENTS BE AVAILABLE TO HELP VOLUNTEERS WITH SITE REPAIRS ON WORK-DAY?	YES _____ NO _____ IF YES, ABOUT HOW MANY? _____
WOULD THE FACILITY BE ABLE TO ASSIST IN PROVIDING ANY OF THE FOLLOWING ON WORK-DAY? (YES OR NO)	FOOD _____ BEVERAGES _____ MATERIALS _____ SKILLED LABOR _____
PLEASE INCLUDE ANY OTHER INFORMATION YOU FEEL IS RELEVANT TO THE SELECTION OF THIS SITE	
EXECUTIVE DIRECTOR OR BOARD CHAIR (SIGNATURE):	Date:

INFORMATION FOR YOU

PLEASE RETURN THIS APPLICATION ALONG WITH A COPY OF YOUR AGENCY'S IRS DETERMINATION LETTER TO THE FOLLOWING ADDRESS:
REBUILDING TOGETHER LONG BEACH
P.O. BOX 3823
LONG BEACH CA 90803

NON-PROFIT AGREEMENT

If selected as a recipient, I give permission for Rebuilding Together Long Beach and its volunteers to perform repairs and improvements at the following address

I understand that the repairs and improvements will be performed free of charge and Rebuilding Together Long Beach and its volunteers disclaim all warranties, expressed or implied, concerning the repairs. The repairs and improvements will be performed by volunteers, some or all of whom may be unskilled.

If selected, the general plan for repairs and improvements will be explained to me. I give Rebuilding Together Long Beach and its volunteers full authority to determine the extent and types of repairs and improvements to be performed, even if they should fail to notify me of any changes from the original plan. I understand that Rebuilding Together Long Beach is a volunteer initiative, and that promises cannot be made as to the specific work that will be done.

If selected, I agree that I will cooperate with the House Captain and teams of volunteers. I will assure that all able-bodied personnel of my organization will participate or that they will be absent during repairs.

In consideration of the repairs and improvements, I further hold Rebuilding Together Long Beach, its officers, directors, agents, donors, volunteers, and other affiliates, collectively or individually, harmless from any claims and liabilities arising at any time as a result of the repairs, including, with limitation, any rights or causes of action resulting from personal injury or death, damage to my property, directly or indirectly arising from any improperly performed repairs or improvements or defects in materials or workmanship.

No inducements or promises have been made to me to secure my signature to this release, other than the intention of Rebuilding Together Long Beach to perform the repairs and improvements.

EXECUTIVE DIRECTOR OR BOARD CHAIR (SIGNATURE):	Date:
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