



P.O. Box 3823
Long Beach, CA 90803
(562) 490-3802

Long Beach

www.rebuildingtogetherlongbeach.org

COMMUNITY BUILDING APPLICATION

Name of Organization _____

Address/City/Zip _____

Executive Director or Board Chair _____

Contact Person (if different) _____

Phone _____ FAX _____ 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. _____

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Describe how these repairs will impact your clients: _____

Describe how these repairs will impact the community: _____

Would staff and/or clients be available to help volunteers with site repairs on work-day?
YES ___ NO ___ If Yes, approximately how many? _____

Would the facility be able to assist in providing any of the following on work-day?

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

Please return this application along with a copy of the agency's IRS Determination Letter to:

Rebuilding Together Long Beach
Site Selection
P.O. Box 3823
Long Beach, CA 90803

Application deadline is July 15 for October repairs
Application deadline is January 31 for April repairs

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

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 volunteer's 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 team of volunteers. I will assure that ALL ABLE BODIED personnel of my organization participate or that they will be absent during the 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.

Signed this _____ day of _____, 20__

Director, _____

WITNESSED BY _____