

FALL MISSION TRIP – FAYETTEVILLE, NC
OCTOBER 14 – 20, 2018

Presbyterian Disaster Assistance - Volunteer Information and Release form

Thank you for volunteering with **Highlands Presbyterian Church, Fayetteville, NC**. Teams like yours are making a difference across the country as you share the love of Christ by giving of your time and service to help families clean up and rebuild.

Please complete the following information. This provides PDA with a record of your volunteer work and allows us to send you 1) a letter or certificate acknowledging your volunteer service and 2) Mission Mosaic, a semi-annual update (in magazine format) of how Presbyterians are responding to disasters around the world. This form also includes required release information and **must be completed before your participation in the village begins.**

Please legibly PRINT the following information:

Check one: Mr. Mrs. Ms. Rev. Other _____

Name (first and last) _____

Email address _____

Would you like to receive PDA Rapid Information Network (PDA-RIN) email updates on disaster responses?
We encourage you to share the information with your congregation. Yes No

Phone numbers (please specify if home/office/cell) _____

Who is your Team Leader on this volunteer mission: **Rev. Bob Abel**
(person who organized the trip and contacted PDA)

What group are you volunteering with? *(the church, presbytery, or organization your team is part of)*

Organization Name **Presbytery of Western North Carolina**

City/State/Zip **Morganton, NC 28655**

Team Leaders please also include:

Organization Street Address **114 Silver Creek Road**

Organization Phone# **828/438-4217**

Arrival Date **October 14, 2018** Departure Date **October 20, 2018**

Have you been to a PDA site before? If yes, when and where?

Please continue to the next page for required release information and signatures.

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GENERAL RELEASE, INDEMNIFICATION AGREEMENT AND
AUTHORIZATION FOR MEDICAL TREATMENT

Participant name: _____ (“Participant”)

DOB: _____

Home Address: _____

City/State/Zip: _____

Telephone: (Cell) _____ (Day/Evening) _____

In consideration of the opportunity provided to me to participate in the **PDA Disaster Response** and any services, housing, food, and the like provided by PCUSA (as defined below), I, Participant, hereby understand and agree that the Presbyterian Church (U.S.A.) General Assembly, all synods, presbyteries, and local churches and their corporations and related entities, their staff, volunteers, directors, officers, agents, elders, deacons, representatives, successors, assigns and entities (hereinafter collectively referred to as "**PCUSA**") will not be responsible in any way whatsoever for loss, damage, or injury of any kind or in any manner resulting from or in connection with my participation in the **PDA Disaster Response**.

I, Participant, understand and agree that PCUSA does not and cannot guarantee my safety in connection with the **PDA Disaster Response**. Further, I understand and agree the activities involved with the **PDA Disaster Response** may include but are not limited to the following: difficult living conditions, risks concerning means of travel, food, water, diseases, pests, poor sanitation, and other health related situations, including potential injury while working. I accept and assume all responsibility for all risks which may occur during, in connection with, or result from my participation in the _____ Disaster Response including, but not limited to, potential injury while working.

RELEASE: With the above in mind and by my signature below, I fully understand, agree and hereby voluntarily release and forever discharge PCUSA. PCUSA shall not be responsible or liable in any way for any accident, loss, death, injury or damage to myself or my property, in connection with my participation in the **PDA Disaster Response** or any portion of the **PDA Disaster Response** even if said injury or action is due to the alleged negligence of PCUSA. Further, I do hereby agree to indemnify and hold PCUSA harmless against any and all liabilities, damages, claims, actions or rights of action, suits, judgments and associated costs and expenses (including, without limitation, attorneys' fees) of whatsoever kind in connection with my participation in the **PDA Disaster Response** or any portion of the **PDA Disaster Response**. Further, I make this agreement on behalf of my heirs, agents, fiduciaries, successors and assigns. I waive, knowingly and voluntarily, each and every claim or right of action I have now or may have in the future against the PCUSA related to my participation in the **PDA Disaster Response**, even if any such claim or right of action is caused by PCUSA's alleged negligence. This document does not release PCUSA from gross negligence.

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MEDICAL COVERAGE: I understand and acknowledge that **no medical or other insurance or health care benefits will be provided to me by PCUSA** during my participation in the PDA Disaster Response, and I certify that I have sufficient health, accident and liability insurance or other benefits to cover any bodily injury or property damage I may incur while participation in the PDA Disaster Response and to cover bodily injury or property damage caused to a third party as a result of my participation in the PDA Disaster Response, as follows:

Company _____ Policy # _____
Address _____

MEDICAL RELEASE: I hereby state that I am in good health and have all medications necessary to treat any allergic or chronic conditions, and I am able to administer such medications without assistance. If at any time during my participation in the PDA Disaster Response I need emergency medical care and am not able to give consent because of my physical or mental condition, I authorize PCUSA to make emergency medical care decisions on my behalf, and I specifically release PCUSA, in making those emergency medical care decisions, from any and all liability associated with said decisions, even if injury or death is the result of PCUSA's alleged negligence.

Person to be notified in case of injury:

Name _____
Telephone: _____ (evening) _____ (daytime)
Cell Phone: _____

ALL PARTICIPANTS MUST SIGN:

My signature below indicates that I have read this entire two page document, understand it completely, and agree to be bound by its terms.

SIGNATURE OF PARTICIPANT: _____

DATE EXECUTED: _____

SIGNATURES MUST BE WITNESSED:

SIGNATURE OF WITNESS: _____

DATE EXECUTED: _____

(SIGNATURE OF PARENT OR LEGAL GUARDIAN IS ALSO REQUIRED IF PARTICIPANT IS UNDER 18 YEARS OF AGE.)

SIGNATURE OF PARENT/LEGAL GUARDIAN (if applicable) _____

SIGNATURE OF WITNESS: _____

DATE EXECUTED: _____

DO NOT

- Interrogate, or ask questions to satisfy your curiosity.
- Try to fix anything.
- Take sides—political, religious, or join or promote mob mentality.
- Blame, criticize, or defend anyone for anything.
- Pray with people unless asked.
- Proselytize, teach, preach.
- Give advice.
- Try to explain or answer “why?”
- Give groundless assurances.
- Make any judgment about reactions.
- Repeat rumors.
- No photographs without permission.
- Confront or argue.
- Make psychological interpretations.
- Do anything you feel uncomfortable about.
- Take notes during conversations with survivors.

AVOID SAYING...

- I know how you feel.*
- I was blessed not to have been hit.*
- At least you have another child.*
- He/She is in a better place.*
- God only gives such pain to those who can handle it.*
- It's just stuff.*
- This was God's will.*
- Others have it much worse.*
- You did the best you could (unless the person has said that to you).*
- You need to experience this pain.*
- Everything will be all right.*

DO

- Tune your heart to the Holy Spirit.
- Demonstrate calm assurance, non-anxious presence.
- Tune your heart, eyes, ears, mind to the person to whom you are listening
- Accept all persons as they are.
- Invite people to talk — then actually listen to what they are saying.
- Let the person know you are hearing by occasionally nodding, saying mmm, reflecting what you heard, and asking clarifying questions.
- Pray aloud with people when asked, avoiding Jesus Christ language unless you are very sure they are Christian.
- Cry if you need to cry.
- Touch only when initiated by the other.
- Respect confidentiality.
- Show respect.
- Be alert to problems that might indicate need for referral. Refer.

You might say...

My heart goes out to you.

Friends here share your grief.

I am sorry for your loss.

I am here to see how you are.

Nothing at all (just be there).

For more, see *Light Our Way*, a book we published with our partners in disaster work.
<http://www.pcusa.org/media/uploads/pda/pdfs/light-our-way.pdf>. You can download or order online.

A Volunteer's Guide to

Ministry of Presence

As a volunteer, you are Christ's Hands and Feet and Eyes and Ears for the survivors. The most important gift you give to each of them is your very presence. Your being there gives them hope, connection, and love.

We of Presbyterian Disaster Assistance deeply appreciate your serving in this way, and we trust you will be blessed. While you are rebuilding, cleaning up, and reclaiming homes, you might happen to meet survivors. We offer some suggestions for doing informal emotional and spiritual care — Ministry of Presence — with them.

The key is tuning your heart to both the Holy Spirit and the Survivor, listening with the ears of your heart, and seeing with the eyes of your heart.

"Truly I tell you, just as you did it to one of the least of these who are members of my family, you did it to me." Matthew 25:40*

Common Reactions to Disaster

It is common for people who have survived disaster to have symptoms of stress, including . . .

- A Need to Tell Their Stories Again and Again
- Confusion in Thinking
- Difficulty Making Decisions
- Memory Dysfunction
- Tears
- Anger
- Grief
- Feeling Overwhelmed, Hopeless
- Changes in Eating and Sleeping
- Difficulty Praying
- Change in level of involvement with one's faith community—great increase or decrease
- Questioning one's own faith
- Anger at God
- Questioning Why?

Most people get over these with their own inner resiliency and the support of family, friends, and folks like you. To heal they need to . . .

- Tell their stories lots of time.
- Stay connected to family/friends.
- Do good self care.

As a volunteer you can foster hope by listening to their stories, encouraging/ reminding them of their connection to family/community, and encouraging good self care.

What You Can Do

Tune your heart to the Holy Spirit and the survivor.

Connect by doing simple things like offering a handshake or bottle of water.

- *Invite Story Telling*
"Where were you when it happened?"
"What was your first response?"
"Would you like to tell me what happened?"
"How was that for you?"

Listen – Listening is the most important tool for ministry of presence.

- Convey that you are listening with . . .
- Facial Expressions and Head Nods - natural empathic expressions and slight smiles. No bobble head.
- Eyes - Maintain appropriate eye contact. Avoid staring, and don't keep looking away.
- Posture – Lean slightly toward survivor with open posture, avoiding crossed legs and arms.
- Short Oral Responses - Say a single word or short phrase to indicate you are listening, like Yes, yeah, uh-huh.
- Clarifying Questions to be sure you're understanding:

- "Are you saying . . . ?"
 - "Could you tell me more about . . . ?"
- Restating –
- "What I hear you saying is . . ."
 - "You are concerned about Am I right?"
- Reflecting – "So you say you are not comfortable about . . ."

Encourage Connection to Community

- Remind survivors of their deep connections to family and friends; e.g., if you hear one mention her grandchild in passing, when there's a break in her story telling, say, "I'd love to hear about your grandchild."
- Encourage connecting to community beyond family.

Encourage Self Care

- Encourage them to
- take breaks from disaster to just play with children/grandchildren/friends.
- Rest.
- Eat nutritious food.
- Exercise.
- Enjoy the things that give them pleasure like music, reading, conversation, and more.
- Laugh.

Build Hope

Remind them of their own resilience by asking:
"So you say you survived _____. I'd love to hear about what helped you through."

Refer or Gently Hand Off to Your Care Leaders when . . .

- you see/hear anything that sounds like a person might need more in-depth assistance than you can give.
- sense someone needs to talk longer than you can afford to listen.