

NOMADS Agency Drop-In Project Application
(Nomads refers to United Methodist Nomads, a New York non-Profit Corporation)

Project Start Date _____ Project End Date _____

This project will be listed on our website for a maximum of 6 months after Start Date
(If you desire to extend, please re-file the first page containing updated information, with NOMADS)

Nature of Project work (skills your project needs):

Organization name: _____

Mailing Address: _____ Street Address _____

City/State/Zip: _____

Phone: Day: (____) _____ Night: (____) _____

Weekend: (____) _____ Fax: (____) _____

E-Mail: _____

Project contact person: _____

Phone: (____) _____ (this will be the person NOMADS will call to schedule work time)

RV PARKING INFO - Location: _____

Will there be a fee for the RV parking? _____

Is the location at the work site? Yes No If no, how far? _____ miles

Number of 30/50 amp hook-ups _____ # of 20 amp hook-ups _____

water spigots _____ # sewer taps _____ If no sewer, how far to dump station? _____ mi.

What is the maximum length/width of RV that can be accommodated? _____

Is security a concern at night? Yes No If yes, explain _____

List altitude if above 1000 ft _____ Give temperature extremes Hi _____ Lo _____

Are daily meals available? Yes No Cost \$ _____ (if applicable)

Are pets permitted if kept in RV or on leash? Yes No

Showers available for NOMADS use? Yes No Toilets available for use? Yes No

Laundry facilities on site? Yes No

WiFi available? Yes _____ No _____

Phone jack for e-mail available? Yes No Hours _____ Location _____

PLEASE INCLUDE MAP AND WRITTEN DIRECTIONS TO RV PARKING SITE

GENERAL INFORMATION:

Hospital or Emergency unit _____ Number of miles _____

Address _____ Phone (____) _____

Distance to: Supermarkets _____ miles Laundromats _____ miles

Propane Dealer _____ miles Wal-Mart _____ miles

NOMADS Agency Drop-In Project Application

Agency Waiver of Liability

AGREEMENT AND GENERAL RELEASE

1. In applying for a team(s) or individual United Methodist NOMADS to work at _____ (Agency/Church) I (we) _____ (Agency rep./Pastor) assure NOMADS that we fully understand the nature and difficulty of the work that we will be asking NOMADS to perform.
2. I (we) also acknowledge that where permits, licenses and inspections are needed our organization takes full responsibility.
3. **GENERAL RELEASE:** In consideration of the work to be performed by NOMADS and described in this application , we hereby indemnify and hold NOMADS, its members, officers, directors, and agents harmless from any and all liability and costs (including attorneys fees) related to or arising out of the work performed by NOMADS. This indemnification and hold harmless agreement will survive the completion of the project by NOMADS.
4. This waiver and release shall extend through all future projects, applications and updated information without additional waiver of liability and general release statements being submitted to NOMADS.

Signature

Title

Date this form was completed _____

Mail to: UM NOMADS, P.O. Box 3508, Shawnee, KS 66203

email: director@nomadsumc.org

fax: 913-232-7566

Revised 02/08