



Name: First: \_\_\_\_\_ Middle: \_\_\_\_\_ Last: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_  
Phone: Home: \_\_\_\_\_ Cell: \_\_\_\_\_ Other: \_\_\_\_\_  
DOB: \_\_\_/\_\_\_/\_\_\_  
Marital Status: Married - Single - Divorced - Widowed  
Head of Household: Yes or No Gender: Male or Female Number of people in household: \_\_\_\_\_

**HOW DID YOU HEAR ABOUT LOL?**

\_\_\_ Word of Mouth from/Personal Invite from: Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
\_\_\_ FBCS Publication: \_\_\_ Vision \_\_\_ Bulletin \_\_\_ Web \_\_\_ Other \_\_\_\_\_  
\_\_\_ Church Announcement: When: \_\_\_\_\_  
\_\_\_ Other: Describe: \_\_\_\_\_

**PLEASE READ BEFORE CONTINUING WITH APPLICATION.**

If we can help, there will be no charge to you for our services. However, you may be asked to provide certain supplies, tools, materials and/or physical assistance related to performing the work you requested. Even though some performing the work may be professionals in the field of work, no one associated with LOL is receiving any compensation for the services performed. All services are being performed on a voluntary basis. No warranty of the work is granted or implied. No liability is assumed on the part of FBCS or the volunteers involved. The applicant is expected to provide a safe environment in which to perform the work agreed to. No services can be performed without the homeowner being present unless alternative arrangements have been made in advance with FBCS.

*Your signature at the bottom of this page indicates that you have read and understand the above paragraph.*

**HOW CAN FBCS HELP? (use back of form if needed)**

\_\_\_ **Automotive Repair** - Make \_\_\_\_\_ Model \_\_\_\_\_ Year \_\_\_\_\_

Please describe the scope of work:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_ **Household Repair** - Please describe the scope of work:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_ **Yard Work** - Please describe the scope of work:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Verification: I certify that all information given on this application is true to the best of my knowledge. I understand this information may be subject to verification and investigation and that any misrepresentation or material omission may cause this request for assistance to be denied and/or any future request to be ineligible for consideration.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_