

**Community Care Days**  
**Home Improvement Application**  
**For June 12-13, 2026 Weekend**

**APPLICATION MUST BE TURNED IN NO LATER THAN**  
**MAY 15, 2026.**

**MISSION AND PURPOSE**

**Community Care Days is an intentional cooperative effort of local churches to minister to Warren County as the hands and feet of Jesus Christ in the area of home repair and maintenance.**

NAME OF APPLICANT(S): \_\_\_\_\_  
(please print information)  
ADDRESS: \_\_\_\_\_  
PHONE: \_\_\_\_\_  
CELL PHONE: \_\_\_\_\_  
EMAIL: \_\_\_\_\_  
DATE: \_\_\_\_\_

**PLEASE RETURN APPLICATION TO ONE OF THE  
FOLLOWING PARTICIPATING CHURCHES:**

- Fairview Center Church – 1495 - 90<sup>th</sup> St – Monmouth, IL 61462**
- Faith United Presbyterian Church – 200 S 8<sup>th</sup> St – Monmouth, IL 61462**
- First Christian Church – 514 N Sunny Lane – Monmouth, IL 61462**
- First Lutheran Church – 116 S B St – Monmouth, IL 61462**
- First United Methodist Church – 221 E Broadway – Monmouth, IL 61462**
- Heritage Bible Church – 302 E Broadway – Monmouth, IL 61462**
- Immaculate Conception Catholic Church – 210 W Broadway – Monmouth, IL 61462**
- River of Life – 1803 80<sup>th</sup> St – Monmouth, IL 61462**
- St. James AME Church – 900 S 3<sup>rd</sup> St – Monmouth, IL 61462**

**Application Agreement**

(I/We) agree to and understand the following when applying for and receiving assistance from Community Care Days.

1. **(I/We) understand that I must own the home for which I am asking repairs. (I/We) indicated by (my/our) signature(s) below, that (I'm/we're) the home owner(s) of the property shown below. (I/We) give permission to the volunteers of the Community Care Days organization and its affiliated members to work on (my/our) property.**
  2. (I/We) understand that simply applying for assistance does not guarantee that (my/our) home will be worked on or that everything asked for on the application may be done to (my/our) home.
  3. (I/We) agree to have someone present at (my/our) house during the time work is being done so that electrical outlets, etc. can be used.
  4. (I/We) understand work days are usually for two days and projects will need to be done in that time frame.
  5. (I/We) understand that pictures may be taken at (my/our) home by Community Care Days that may be used to promote in a positive manner the ministries of Community Care Days.
  6. (I/We) understand that Community Care Days' goal is to help new and additional people each year.
  7. **If a ramp is built on our property and, in the future, we are no longer using the ramp or we are leaving this property, we consent that the Community Care Days organization could disassemble the ramp for the purpose of using it for another project where a ramp is needed. (This consent is not binding on the acceptance of this application.) Please sign here if you agree to this request:**
- 
8. **(I/We) understand that the Community Care Days organization and its affiliates do not have insurance coverage for protection against legal claims or liability damage suits that might arise in their work on (my/our) home and property. Therefore, in consideration of the services rendered, or to be rendered, on the premises indicated below, (I/We) hereby waive any and all claims or demands that may arise or accrue to (me/us), growing out of any action or omissions by said organization and/or any of its members or helpers in rendering such service and specifically covenant not to sue it or them for any of said act or omissions. (I/We) will hold harmless the Community Care Days organization, the churches involved in Community Care Days and the individuals volunteering for Community Care Days.**
  9. **(I/We) understand that due to the number of applications that may be submitted to Community Care Days and the number of volunteers that come, our application may have to be completed at a later date than the scheduled weekend shown on this form. (I/We) accept that the work may be completed at a future date mutually agreed upon by all parties.**

\_\_\_\_\_  
INITIALS  
OF ALL  
OWNERS

**10. (I/We) understand that my application will not receive consideration unless I have signed and dated below.**

Signature \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_  
(if co-applicants)

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Please provide the following information and give as much detail as possible.

Name \_\_\_\_\_ Age \_\_\_\_\_

Spouse \_\_\_\_\_ Age \_\_\_\_\_

married \_\_\_\_\_ widowed \_\_\_\_\_ divorced \_\_\_\_\_ single \_\_\_\_\_

Directions to home (if applicable):

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

Other members of the family in the home: (please list name, age, sex, relationship)

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

Please state reason why assistance is needed.

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

**Do you own the home for which you are asking repairs? \_\_\_\_\_**

How long have you owned the home? \_\_\_\_\_ (approx. years)

Have you received assistance from The Community Care Days before? \_\_\_\_\_

What year was work done and what was done? \_\_\_\_\_

---

---

What repairs are needed? If you are marking two items, please prioritize the items by marking "1" by your most needed, "2" by the next needed.

(For each item marked, please give more information on following pages.)

\_\_\_\_\_ yard work

\_\_\_\_\_ misc. handyman

\_\_\_\_\_ small job exterior painting

\_\_\_\_\_ light porch/deck repair

\_\_\_\_\_ ramp

\_\_\_\_\_ window washing

**PLEASE PROVIDE MORE DETAILED INFORMATION ON FOLLOWING PAGES.**

**IF YOU MARKED YARD WORK:**

Please give details if possible. \_\_\_\_\_

---

---

What materials and/ or labor could you provide?

---

**IF YOU MARKED MISCELLANEOUS HANDYMAN:**

Please give details if possible. \_\_\_\_\_

---

---

What materials and/ or labor could you provide?

---

---

**IF YOU MARKED SMALL JOB EXTERIOR PAINTING:**

Please give details if possible. \_\_\_\_\_

---

---

What materials and/ or labor could you provide?

---

**IF YOU MARKED LIGHT PORCH/DECK REPAIR:**

Please give details of what is needed. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What materials and/or labor could you provide?  
\_\_\_\_\_  
\_\_\_\_\_

**IF YOU MARKED RAMP:**

Please give details if possible. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What materials and/ or labor could you provide?  
\_\_\_\_\_  
\_\_\_\_\_

**IF YOU MARKED WINDOW WASHING:**

Please give details if possible. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What materials and/ or labor could you provide?  
\_\_\_\_\_