



ROCKY MOUNTAIN DEVELOPMENT COUNCIL, INC.  
P.O. Box 1717 | 200 South Cruse Avenue | Helena, MT 59624-1717  
phone: 406.447.1680 | toll free: 800.356.6544 | fax: 406.447.1629

## Spirit of Service 2019

Spirit of Service (SOS) is an annual “Spring Cleaning” event promoted by local businesses and organizations. This year on **June 5, 2019** (rain backup day is **June 11, 2019**) program volunteers will invest up to an entire day helping homeowners by performing yard work or minor maintenance on their homes. The home **must be owner-occupied** and the homeowner must be unable to do the work due to age or other limitations. While there are no income guidelines for this program, we do require your completion of the attached form for statistical purposes. Homes must be located in Helena, East Helena, or the Helena Valley. **Priority will be given to homeowners who have not been helped within the last three years.**

The service is free of charge to the homeowners. The organizations involved provide the tools, labor and materials required to do the work. **The work the volunteers perform is limited to typical spring cleaning chores such as grass cutting, hedge trimming, raking, trash removal, window washing, cleaning of rain gutters, and some painting.** Interior work is not a part of the program and volunteers are restricted from entering the homes. The volunteers come from various businesses and organizations in the Helena area and are not trained construction, painting, or landscaping professionals.

If you feel that you or someone you know would be eligible for this service, please call Kathy Marks at Rocky Mountain Development Council, Inc. at 406-457-7323. You can also mail or bring the application to the following address:

Rocky Mountain Development Council, Inc.  
SOS Program  
200 South Cruse Avenue  
PO Box 1717  
Helena, MT 59624

**All applications are considered and evaluated, however not all are accepted and scheduled because of volunteer limitations.** Representatives of the SOS Program visit the homes to assess applications and the request in advance of the selection process.

As we get closer to our 2019 Spirit of Service event and work on the selected property, we contact newspaper and TV stations to secure media coverage of the event. We get our own cameras out to photograph our crews hard at work, too. Ordinarily, media crews make half a dozen stops among SOS homes. In advance, it helps us a great deal to know whether you are comfortable with photos or interviews.

**Please carefully read the guidelines and answer the questions on the application form.**



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## Homeowner Guidelines

SOS is for seniors, veterans, or individuals with disabilities living in **owner-occupied homes** who are unable to do the work themselves because of age or other limitations.

Once all applications are collected, Rocky employees will make appointments and visit the homes of all applicants to be sure of what needs to be done.

If your home is chosen for Spirit of Service, you must agree to the following:

- ✓ Allow the Helena Transfer Station or Tri-County Disposal to put a dumpster on your property a day or two prior to SOS Day if needed.
- ✓ Allow Litt'l Johns to put a porta-potty on your property a day or two prior to SOS Day if needed.
- ✓ Do not add anything to the scope of the project after the visit by SOS employees.
- ✓ Remember that those helping you are volunteers and cannot be asked to do more than what can be accomplished during their volunteer day per this agreement.
- ✓ Understand that volunteers can only paint one-story homes/garages and no outbuildings.
- ✓ If paint is needed, I agree as homeowner to sign off on a paint sample so that the correct shade/color is used.

I/we agree to the guidelines outlined above:

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Homeowner Date

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Homeowner Date

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SOS Coordinator Date

**Spirit of Service Application and Authorization**  
**Deadline: April 5, 2019**

Name of Homeowner (recipient): \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Date of Application: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

Additional Contact: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Type of work requested by homeowners at this address:

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

Will you be at home on event day or alternate (June 6 and 11)?  Yes  No

I am willing to be photographed with the work crews or at my home.  Yes  No

I am willing to visit with a reporter and be photographed with my home.  Yes  No

I own and reside in the home listed above.  Yes  No

I am a veteran of US military.  Yes  No

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The Undersigned hereby RELEASES, DISCHARGES, AND WAIVES any claims, actions, or suits of any character, name and description whatsoever that the Recipient may have against Rocky Mountain Development Council, Inc.'s Spirit of Service Program, its directors, officers, agents, and employees, and the volunteers as the result of the presence of the volunteers on site.

The undersigned has read and fully understands this agreement, and has not been offered any additional consideration or enticement, and the Undersigned executes the agreement fully for the purpose and consideration expressed above.

**Disclaimer: Please understand that although we will try our best to accommodate your needs, we may not be able to provide service with your home this year or work on all projects listed on this application. We will do our best to provide service to you that fits the capabilities of our crew. Please initial below.**

\_\_\_\_\_ I understand and accept the above statement.

X \_\_\_\_\_ Date \_\_\_\_\_  
Recipient's Signature





***The following statistical-gathering questions are optional for you to complete. While this is not an income-based program, it is important to RMDC and our grantors to have demographic information. This information will not be attached to your name in any way, and the work we will do for you is not dependent upon this information.  
Thank you for your cooperation.***

**Race:** (check all race categories that apply)

- White       American Indian/Alaskan Native       Asian American       African American  
 Native Hawaiian/Pacific Islander       Other \_\_\_\_\_

**Ethnicity:**     Non-Hispanic/Latino       Hispanic/Latino

**Gender:**       Male       Female

**Number in household:** \_\_\_ If two or more, is one person a caregiver?  Yes     No

**Monthly household income:** (check the box that best represents your monthly household income)

- 1  Under \$990      2  Under \$1,335      3  Under \$1,680      4  Under \$2,025  
5  Under \$2,370      6  Under \$2,715      7  Over \$2,715

Disabled?     Yes  No      Veteran?     Yes  No

If you are **under** 60 years of age, is your spouse over 60?     Yes  No

If you are **under** 60 years of age, are you disabled and living with someone over 60?     Yes  No