



Basic Residential Carpentry Program Presented in Partnership by Alabama Home Builders Foundation

About the Program: Alabama Home Builders Foundation is sponsoring an eight-week Basic Residential Carpentry course for adult learners. Enrollment is limited to people who plan on obtaining employment in residential construction. The course will be offered starting Wednesday, October 16th thru Friday, Dec. 6th. The class will meet Wednesday and Friday evenings from 6:00 p.m.-8:30 p.m.

Course Outline:

Week 1 – Importance of Safety; Basic Construction Tools; How to Read a Tape Measure

Week 2 – Basic Construction Site Layout; Reading Blueprints

Week 3 – Floor & Wall Framing

Week 4 – Roof & Ceiling Framing (cutting rafters)

Week 5 – Window/Door Installation; Siding & Exterior Trim

Week 6 – Interior Trim & Finishes

Week 7 – Stair Framing

Week 8- Wrap Up; Graduation Celebration

Each class meeting will provide time for classroom instruction and hands-on time in the shop.

Expected Outcome: Students completing the course will receive instruction on basic construction that will be beneficial on a residential construction jobsite. A Certificate of Completion from the Alabama Home Builders Foundation will be given to all who complete the course.

Classes will be held at Jimmie Hale Mission, 3420 2nd Avenue North, Birmingham, AL 35222

There is a limit of 15 students per class. It is important to get your registration materials completed and submitted as quickly as possible. Please fill out the registration form and sign the liability waiver. You can scan and email registration materials, send by mail or fax.

Phone: 1-800-745-4222

Email: koryboling@hbaa.org

Fax: 334-834-5380

Mail: AHBF, P.O. Box 241305, Montgomery, AL 36124-1305

Basic Residential Carpentry Application

Birmingham Fall 2024

Required Information:

(Please print legibly in ink)

Name: _____ Best Phone Number: (____) _____

Address: _____ City/State/Zip: _____

*Email: _____ *this is our primary way of communication

Do you work for a member of the Home Builders Association? Yes ____ No ____

If so, name of member: _____

Why do you want to participate in this program? _____

If selected for this program, do you consent to have your contact information posted on the Foundation's job board, so you can be contacted for jobs? Yes ____ No ____

Although the class is free, we do ask for you to follow us on Facebook so we can easily share information with you. www.facebook.com/AlaHBFoundation

Optional Information: This is not required for attendance, but it will help instructors plan activities that best meet the needs of those enrolled.

Sex: M____ F____ Age: _____

Work experience in construction field: Yes ____ No ____

If yes, please describe: _____

How did you hear about this program? _____

PLEASE NOTE: Pre-registration does not guarantee acceptance. Applicants will be notified of their status within one week of the start of class. If you are not selected, future classes will be offered.

**CARPENTRY CERTIFICATE PROGRAM ACCIDENT WAIVER AND RELEASE OF
LIABILITY FORM**

I HEREBY ASSUME ALL OF THE RISKS OF PARTICIPATING IN ANY/ALL ACTIVITIES ASSOCIATED WITH THIS EVENT, including by way of example and not limitation, any risks that may arise from negligence or carelessness on the part of the persons or entities being released from dangerous of defective equipment or property owned, maintained, or controlled by them, or because of their possible liability without fault.

I certify that I am physically fit and have not been advised to not participate by a qualified medical professional. I certify that there are no health-related reasons or problems which preclude my participation in this program. I acknowledge that this *Accident Waiver and Release of Liability Form* will be used by the event holders, sponsors, and organizers of the program in which I may participate, and that it will govern my actions and responsibilities at said program. In consideration of my application and permitting me to participate in this program, I hereby take action for myself, my executors, administrators, heirs, next of kin, successors and assigns as follows:

- (A) I WAIVE, RELEASE, AND DISCHARGE from any and all liability, including but not limited to, liability arising from the negligence, wantonness or fault of the entities or persons released, for my disability, personal injury, property theft, or actions of any kind which may hereafter occur to me including my traveling to and from this program, THE FOLLOWING ENTITIES OR PERSONS: Alabama Home Builders Foundation, Downtown Jimmie Hale Mission, Inc. and/or their directors, officers, employees, volunteers, representatives, agents, program holders and sponsors.
- (B) INDEMNIFY, HOLD HARMLESS AND AGREEMENT NOT TO SUE the entities or persons mentioned in this paragraph from any and all liabilities or claims made as a result of participation in this program, whether caused by the negligence of releasee or otherwise.

I acknowledge and agree that the entities or persons listed above are NOT responsible for the errors, omissions, acts, or failures to act of any party or entity conducting a specific activity on their behalf.

I acknowledge and agree that this program may involve a test of a person's physical and mental limits and carries with it the potential for serious injury.

I hereby consent to receive medical treatment which may be deemed advisable in the event of injury, accident, and/or illness during this activity.

I understand while participating in this activity, I may be photographed.

I agree to allow my photo, video, or film likeness to be used for any legitimate purpose by the activity holders, producers, sponsors, organizers, and assigns.

The *Accident Waiver and Release of Liability Form* shall be construed broadly to provide a release and waiver to the maximum extent permissible under applicable law.

BY SIGNING BELOW: I CERTIFY THAT I HAVE READ THIS DOCUMENT AND I FULLY UNDERSTAND ITS CONTENT. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT, AND I SIGN IT OF MY OWN FREE WILL. I ALSO CERTIFY THAT I AM 19 YEARS OF AGE OR OLDER AND ELIGIBLE TO PARTICIPATE.

Participant's Name (Print Legibly)

Date

Participant's Signature