



2019 Volunteer Registration Form

A letter of confirmation will be sent to you with team assignment(s)

COMPANY/ORGANIZATION NAME _____

Address _____

City/State/Zip _____

COMPANY COORDINATOR _____

Title _____

Address (if different from above) _____

Day Phone() _____ Evening Phone() _____ Email _____

Number of volunteers: _____

Number of t-shirts: _____ M _____ L _____ XL _____ XXL _____ XXXL

Project Preferences

- Our employees prefer to work together in the same location
 We're willing to work in smaller groups at different locations if needed
 We would like to work with the following specific agency if possible:
Note: *Because the volume of company requests may exceed our pool of viable projects at specific agencies, matches will be arranged on a first-come, first-served basis. We will make every effort to accommodate your project request.*

Project Type Preference (please indicate top two choices):

_____ Whatever is needed _____ Office work or computer training
_____ Hands-on (repair/fix-up)* _____ Direct client interaction

**If you marked "hands-on" as your project type preference, please answer the following:*

Can your company/organization help provide supplies for your CCD project? _____ Yes _____ No

If "Yes", please indicate types of resources easily accessible to your company/organization:

Special Skills (please indicate below any special skills in your group):

_____ Carpentry _____ Sewing _____ Data Entry _____ Accounting
_____ Art _____ Computer Training _____ Other (please list) _____

RETURN THIS FORM TO UNITED WAY BY AUGUST 23, 2019
115 S. BROAD STREET, LANCASTER, OH 43130
ATTENTION: KATIE ARENT