



2017 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 25, 2017
115 S. BROAD STREET, LANCASTER, OH 43130
ATTENTION: SHELLY WHITE