

UNITED WAY DAY OF ACTION WEDNESDAY, JUNE 21, 2017



United Way of 1000 Lakes

REGISTRATION FORM

Company: _____ Contact Person: _____

Address: _____ City: _____ Zip: _____

Phone: _____ Cell: _____ Email: _____

Team:

Name: _____ Email: _____

Name: _____ Email: _____

Name: _____ Email: _____

Name: _____ Email: _____

Name: _____ Email: _____

Name: _____ Email: _____

Name: _____ Email: _____

Name: _____ Email: _____

Name: _____ Email: _____

Name: _____ Email: _____

Project Shifts:

Morning: 9:00 a.m. - 12:30 p.m. Afternoon: 11:30 - 3:00 p.m. All Day: 9:00 a.m. - 3:00 p.m. Other: _____

Project Site Preference:

Shirt Sizes:

Volunteers will receive a Day of Action t-shirt and lunch (t-shirts guaranteed to first 100 registered volunteers).

Youth Small Medium Large X-Large XX-Large None

To register, visit www.unitedwayof1000lakes.org/EVENTS/Day-of-Action, email kimberly@unitedwayof1000lakes.org or call 218-999-7570

GIVE. ADVOCATE. VOLUNTEER.

[facebook.com/UnitedWayof1000Lakes](https://www.facebook.com/UnitedWayof1000Lakes)
 twitter.com/UWay1000Lakes

www.unitedwayof1000lakes.org

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VOLUNTEER INTEREST FORM

Volunteer Team Leader- use this form with your team to figure out which projects your team is most interested in.

POTENTIAL PROJECT AREAS:

Check the appropriate box(es)

- | | |
|--|---|
| <input type="checkbox"/> Assembling | <input type="checkbox"/> Landscaping |
| <input type="checkbox"/> Care Packages | <input type="checkbox"/> Painting |
| <input type="checkbox"/> Cleaning/Organizing | <input type="checkbox"/> Registration Table |
| <input type="checkbox"/> First-aid Tent | <input type="checkbox"/> Runner/Delivery |
| <input type="checkbox"/> Gardening | <input type="checkbox"/> No Preference |
| <input type="checkbox"/> Grounds Clean-up | |
-

VOLUNTEER SKILLS:

Check the appropriate box(es)

- | | |
|---|--|
| <input type="checkbox"/> Master Gardener | <input type="checkbox"/> Landscaping & Grounds Maintenance |
| <input type="checkbox"/> Medical Professional/First Aid Certified | <input type="checkbox"/> Electrical |
| <input type="checkbox"/> Carpentry | <input type="checkbox"/> Equipment Operator (skid steer; garden tiller; brush cutter; other _____) |
| <input type="checkbox"/> Contractor | <input type="checkbox"/> Trained in Construction/Worksite Safety |
| <input type="checkbox"/> Painting | |
-

PROJECT SHIFTS:

Check the appropriate box(es)

- | | |
|--|--|
| <input type="checkbox"/> Morning: 9:00 a.m. - 12:30 p.m. | <input type="checkbox"/> Interested in helping set-up at 7:30 a.m. |
| <input type="checkbox"/> Afternoon: 11:30 - 3:00 p.m. | <input type="checkbox"/> Interested in helping clean-up at 3 p.m. |
| <input type="checkbox"/> All Day: 9:00 a.m. - 3:00 p.m. | |
| <input type="checkbox"/> Other: | |

Check-in begins at 8:30 a.m. at Day of Action location.

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