

## **21<sup>st</sup> Annual Day of Caring: September 19, 2018**

### **TEAM LEADER RESPONSIBILITIES**

#### **Recruit Your Team**

- Determine a Team Leader who will be responsible for communicating with United Way of Mifflin-Juniata, the assigned Agency Coordinator, and the volunteers.
- Use the company email list or internal newsletter to announce your participation in Day of Caring and to recruit volunteers.
- Determine your team's interest and skill levels, and communicate that information to United Way of Mifflin-Juniata as clearly as possible on the registration form.

#### **Prepare For The Project**

- Complete volunteer registration form and submit to United Way of Mifflin-Juniata no later than **8/10/18**.
- Have team members complete release forms.
- Determine t-shirt sizes for team members and submit t-shirt form to United Way of Mifflin-Juniata no later than **8/10/18**.
- Visit and survey the Agency Project site and confirm that the project fits the team (Does the project fit the time allotted? Will you have enough volunteers? Is the site prepared with materials?). Keep in contact with the Agency Project Coordinator as the Day of Caring approaches.
- Communicate with all team members so that they know what their project is, how to dress, where to meet, what tools to bring, and what they will be doing.
- Attend the Team Leader/Agency Project Coordinator lunch on **8/21/18**.
- Pick-up t-shirts on **9/14/18** at the United Way of Mifflin-Juniata office and turn in all volunteer release forms.
- Procure supplies/safety gear as needed.
- Plan for your team's lunch. Some Agencies may choose to provide lunch for your team, but that is not required of them.
- Prepare a rain plan with the Agency Coordinator (Will your project take place if it's raining? Will you reschedule? How will you coordinate with each other if it's raining?).

#### **On The Day of Caring**

- HAVE FUN!
- Start your day at the Kick-Off Celebration Breakfast at 7 AM. Breakfast in Mifflin County will be held at Kish Park (Orange Pavillion), and Juniata County's breakfast will be at Messiah Lutheran Church.
- Get your team photo taken before you leave breakfast.
- There will be media opportunities during the day. The media will receive project lists and may visit many of the sites.
- If possible, take before and after pictures of your work to share with United Way of Mifflin-Juniata.
- While on site, please keep the details of people you meet and their circumstances confidential.
- During the Day of Caring, if there are ever questions about projects, volunteers, etc., feel free to contact the United Way of Mifflin-Juniata at 717-248-9636.

#### **Celebrate**

- Thank your co-workers for the volunteer efforts.
- Reflect on your project. What did it mean to those you served?
- Let others know about your good work through your company newsletter, website, and social media.
- Share photos and stories with United Way of Mifflin-Juniata.



UNITED WAY OF MIFFLIN-JUNIATA  
**VOLUNTEER RELEASE FORM**

Note: Please use this form as a master to make additional copies for each volunteer.  
**A RELEASE FORM IS NEEDED FOR EACH VOLUNTEER  
BY 9/14/18.**

Company/Organization: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

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

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

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LIABILITY RELEASE - I hereby release, indemnify and hold harmless United Way of Mifflin-Juniata, the organizers, the agency at which I volunteer and sponsors and supervisors of all activities, from any and all liability in connection with any injury (including any injury caused by negligence) in conjunction with Day of Caring, Wednesday, September 19, 2018. I likewise hold harmless from liability any person transporting me to or from any United Way activity.

I also certify that I am in good health and able to participate in the program activities on September 19, 2018. I certify that I am over eighteen years of age and am competent to contract my name insofar as the above is concerned. I have read the foregoing release, authorization, and agreement, before affixing my signature below and warrant that I fully understand the contents thereof.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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COMMUNICATIONS RELEASE- I hereby assign the rights to the video and/or photographic recording(s) made of me on Wednesday, September 19, 2018 by United Way of Mifflin-Juniata or its agency(s), hereafter referred to as United Way, to said United Way. I hereby authorize the editing, duplication, reproduction, copyright, exhibition, broadcast, and/or nonprofit use and distribution of said recording(s) for purposes deemed suitable by United Way.

I hereby waive any right to approve the finished products. I hereby certify that I am over eighteen years of age and am competent to contract my own name insofar as the above is concerned.

I have read the foregoing release, authorization, and agreement, before affixing my signature below and warrant that I fully understand the contents thereof.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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PARENTAL CONSENT/RELEASE- If the individual is a minor (under 18 years of age) the following must be signed by a parent or legal guardian.

I hereby consent and agree, individually and as a parent or legal guardian of, to all the terms and provisions above.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name (please print) \_\_\_\_\_ Relationship to minor: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_



United Way  
of Mifflin-Juniata

UNITED WAY OF MIFFLIN-JUNIATA

Day of Caring  
September 19, 2018

Volunteer List & T-Shirt Orders Due by **August 10, 2018**  
Send by Fax: 717.248.5648 or Email:kleister@mjunitedway.org

T-shirts are provided at no cost to volunteers by the Day of Caring Sponsors. T-shirts are in men's sizes.

Name	Sm	Med	Lg	X Lg	XX Lg	other
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30						
<b>Total</b>						

Failure to complete Team list and t-shirt sizes may result in the omission of names in program.

