

## **2023 Volunteer Team Registration Form**

## **DEADLINE FOR SUBMISSION: August 11, 2023**

The person registering a team should also be the volunteer team leader for the Day of Caring. Please be sure to list the correct email and phone number of the person who will be at the project site on the Day of Caring. The person listed as the volunteer team leader will be contacted after the application closes and notified of which project your team was assigned to based on the size of your team, interests and skills.

| Company/Organization         |                                  |                                      | _ |
|------------------------------|----------------------------------|--------------------------------------|---|
| Name of Volunteer Team L     | eader                            |                                      |   |
| Volunteer Team Leader Pho    | one Number                       |                                      |   |
| Team Leader Email Address    |                                  |                                      |   |
| Company Address              |                                  |                                      | - |
| City                         | State                            | Zip Code                             | _ |
| *********                    | ********                         | *************                        | * |
| Number of Volunteers (Esti   | mated)                           |                                      |   |
| ls your team available for a | full day of participation? (8:00 | am to 3:00pm) If no, please explain. |   |
| ☐ Yes                        |                                  |                                      |   |
| Пио                          |                                  |                                      |   |

| Will your team be attending the kick-off event from 7:00 to 8:0   | O am for breakfast and team photos?     |
|---|---|
| Yes# of volunteers attending the  | ne breakfast                            |
| ☐ KISH PARK Breakfast   | Mifflintown Breakfast                   |
| □ No  |   |
| We try to honor your preference in terms of type of project. We t<br>come, first-served basis. However, please note that in some circu<br>depending on projects and team sizes. |   |
| Please mark your 1 <sup>st</sup> , 2 <sup>nd</sup> , and 3 <sup>rd</sup> choice for the type of project y   | your team is interested in:             |
| Painting/Staining Sort  | ing, Stacking, Distributing, Assembling |
| Building/Construction/Carpentry Land  | dscaping/Mulching/Weeding               |
| Power Washing Clea  | ning/Scrubbing                          |
| Engineering (Mechanical, Electrical, Plumbing)  |   |
| Other: Please Specify)  |   |
| Please check and list any special skills and talents your team me for us to know:   | embers have which would be helpful      |
| Plumbing  | Carpentry                               |
| Mechanical Aptitude   | Computer Skills                         |
| Engineering   | Landscaping                             |
| Lifting (Able to lift up to lbs.  | Construction                            |
| Climbing ladders/scaffolding  |   |
| Other:  |   |
|   |   |
|   |   |
| Our team is available to go to:   |   |
| Mifflin County OnlyJuniata County Only  | Mifflin or Juniata County               |
| Sometimes we don't have a project that requires a large team of willing to split up into smaller groups and be assigned to different team.  Yes  No                             |   |

| a specific agency your team would like to request, please indicate on the line below.   |
|---|
| Please list any equipment your company/organization may have available to use during the project: (backhoe, shovels, painting equipment, truck, etc.) |
| Do you have any additional suggestions or feedback?   |
|   |
|   |
|   |

## Please email completed form to khaas@mjunitedway.org

## **Helpful Reminders**

A United Way representative will be in contact with you (the volunteer team leader) the week of August 28<sup>th</sup> to let you know the project that has been assigned to your team. Please keep an eye out for an email with details of the project site you were matched with because in that email will be the contact information of the project coordinator who you will need to reach out to.

It will be the responsibility of the project coordinator and volunteer team leader to make the necessary arrangements to complete the project. Every volunteer team leader and project coordinator will be provided with the contact information of their matched project or team so arrangements can be made to complete the project.

Lunches will be the responsibility of the volunteer team to bring or coordinate.

A Volunteer Release form must be completed for each volunteer before the day of the event.

Every volunteer will receive a t-shirt. Please make sure to return the T-Shirt Form by the deadline. T-Shirt pick up will be announced at a later date via email.

If you have any questions, please contact the United Way office at 717-248-9636 or email Kenda at khaas@mjunitedway.org

Thank you for your interest in the 2023 Day of Caring!