



2016 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
- _____ Hands-on (repair/fix-up)*
- _____ Office work or computer training
- _____ 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, 2016
115 S. BROAD STREET, LANCASTER, OH 43130
ATTENTION: Audrey Schmelzer