

LIVE UNITED DAY OF CARING

September 30, 2021

Agency Project Form - *due by September 10*

Name of Agency: _____

Address: _____

Director/Coordinator: _____

Phone: _____ E-mail: _____

Project Info

Project Site Address: _____

Volunteer Duties: _____

Project time: Morning (8:00am-11:45am) Afternoon (1:15am-4:45am) All Day

Items needed for project (example: paint brushes, rakes, hammers, gloves....etc.): _____

Will the agency provide these tools? Yes No

Number of Volunteers needed: Maximum: _____ Minimum: _____

Will you provide water for volunteers? Yes No

Will you be attending the Thank You, Volunteers! experience? Yes No Total: _____

Please specify any food allergies here _____

Link to Virtual Opportunities: _____

*If you have more than one project, feel free to make copies of this form and return to Kessie Karg by email by September 10, 2021.

Email: kkarg@acuw.org

www.acuw.org



ADDRESS
650 Grand Street
Allegan, MI 49010
269.673.6545

