

DON'T JUST WEAR THE SHIRT, LIVE IT!

DAY OF CARING 3.28.2018

United Way of Muscatine (UWM) invites you to participate in our 10th **Annual Day of Caring Part Two** on **Wednesday**, **March 28**, **2018!** This is a unique opportunity for students at your school to complete a meaningful service project for a local nonprofit agency or an area resident who needs a hand.

Day of Caring exemplifies Living United when Students join with local civic and community groups to connect with others in the Muscatine community who need our help.

There are so many benefits to your group uniting with the community on Day of Caring. Through your involvement, you and your team are able to assist an agency or a neighbor with a project that would not normally be completed for lack of money or manpower.

When you build a team of committed student volunteers within your school to serve, you show a spirit of compassion and unity to your students that reflect in the mission of United Way.

We are excited about connecting you and your volunteers with our community partners on Day of Caring! All entries must be submitted to: United Way of Muscatine, 208 W. 2nd St. Ste. 201, Muscatine, IA 52761 or fax (563) 263-8572 no later than March 1, 2018. Contact Nichole Sorgenfrey at (563) 263-5963 or e-mail nichole@unitedwaymuscatine.org for more information.

Together, united, we can inspire hope and create opportunities for a better tomorrow.

That's what it means to LIVE UNITED.

DAY OF CARING 3.28.2018

Thank you to our Day of Caring Overall Sponsor:





2018 Day of Caring Lunch:

You and your team are invited to our 2018 Spring Day of Caring Lunch. Please RSVP on page 3.

Site: Red Brick Building on the riverfront. Lunch Time: 11:30am-1:00pm (drop in)

A Note on responsibilities of a Team Leader

- Recruit individuals to form a Day of Caring Team
- Register and fill out appropriate information for team(s) & submit not later than March 1, 2018.
- Training Sessions for Team Leader:

Wednesday, March 7: 7:30am or 4 pm

- Attend a Team Leader training to:
 - Receive information on what each team member will need for the Day of Caring
 - o Receive information about working w/ the agency project coordinators and UWM to ensure the successful completion of the project and create a positive team experience.
- Assist Agency Project Site Coordinator with any pre-planning (Supplies and materials are the responsibility of the agency unless previous arrangements have been made between the two parties)
- Changes this year due to fund shortage:
 - o **Elementary** schools students who participate will receive a volunteer bracelet.
 - o Middle School students who participate will receive a t-shirt for volunteering.
 - o **High School** students will receive a t-shirt and lunch for volunteering.

You will be <u>notified by email</u> when your team is assigned and you should be contacted by the on-site coordinator within a reasonable amount of time. He/She will invite you to inspect the work site to discuss the issues. If you are not contacted within a reasonable amount of time, please either contact

the site coordinator or us directly.



United Way of Muscatine

unitedwaymuscatine.org

DAY OF CARING 3.28.2018

United Way of Muscatine Group Volunteer Form (one form per team)

	am Name/School:					Mark Dhana				
	Project Coordinator: Work Phone: Cell Phone: Fax:									
	ork Address:			/·						
E-r	nail <u>:</u>									
As	Team Leader, I will atter	nd the followi	ng training s	ession (ci	rcle or	ne): March 7, 7:3	0 am or 4:00	0 pm		
1/\ \	la profer to work with.	1/1/10 04	an da.			Ma profor to	. work			
	/e prefer to work with:	☐ Dhysic			\bigcirc V	We prefer to				
	nyone in need gencies & charities		al Labor hysical Labo	ır	=	Vherever needed ndoor work	All DayMorning	(Q 12))	
	nurches		eference	' I	_	Outdoor work				
_	dividuals/Elderly	O NO FIG	elelelice		\mathcal{O}^{C}	Juluooi Work	No Prefe			
۱۱۱۱ <i>ک</i>	arriadais/ Elacity						ONOTICIO	,, СПС	•	
Ple	ease list any specific skills	s your group	may have (c	arpentry,	sewin	g, painting, landsc	aping, etc.):			
										
										
Ple	ease list any projects you	r group could	d not perform	due to v	olunte	er limitations (aller	gies, disabilitie	es, pre	egnancy, w	eight //
	ng restrictions, etc.):	3 - 1					9,	, 1	- 5 5,	3 .
	<i>,</i> 									
D.										
PIE	ease list any specific mate	erials your co	ompany can	provide to	or a pro	oject (lumber, scaf	fold, paint, boo	oks, e	etc.):	
Vo	lunteer Names & T-shirt s	size. Attach s	separate she	et if nece	ssarv.	Specify adult or ch	nild size for te	e shir	ts. If more	than 14
	mbers per team, please		•		, ,	, , , , , , , , , , , , , , , , , , ,				
	Name	Shirt	Breakfast	Lunch		Name	Shi		Breakfast	Lunch
		Size	(Y/N)	(Y/N)			Siz	е	(Y/N)	(Y/N)
1					8					
2					9					
3					10					
5					11 12					
6					13					
7					14					
/					14					

Please return this form by March 1, 2018. <u>T-shirt sizes NOT returned by March 1 will NOT receive a shirt.</u>

Questions? Call Nichole at 263-5963.

DAY OF CARING 3.28.2018

United Way of Muscatine

Release Form (Must be signed by every participant)

I/We, the undersigned, do hereby release from liability any persons volunteering/working on projects, owners of property or any person associated with the United Way of Muscatine Day of Caring program. In case of emergency, I/We permit United Way representatives and any person on site to contact emergency response should something happen to me while volunteering.

I/We do hereby give unlimited permission to the United Way of Muscatine to use my picture/likeness, testimonial, audio or video talent on television, radio or in any printed materials for promotional purposes without any remuneration or repercussion to the United Way of Muscatine.

School Name:		
Print Name:	Signature:	Email:
	Date:	
Print Name:	Signature:	Email:
	Date:	
Print Name:	Signature:	Email:
	Date:	
Print Name:	Signature:	Email:
	Date:	
Print Name:	Signature:	Email:
	Date:	
Print Name:	Signature:	Email:
	Date:	
Print Name:	Signature:	Email:
	Date:	
Print Name:	Signature:	Email:
	Date:	
Print Name:	Signature:	Email:
	Dato	

Print Name:	Signature:	Email:
	Date:	
Print Name:	Signature:	Email:
	Date:	
Print Name:	Signature:	Email:
	Date:	
Print Name:	Signature:	Email:
	Date:	
Print Name:	Signature:	Email:
	Date:	
Print Name:	Signature:	Email:
	Date:	
Print Name:	Signature:	Email:
	Date:	

Please fax/mail this form to (563)263-8572, or mail to 208 W. 2nd St. Ste. 201, Muscatine, IA 52761 before March 1, 2018. Attach separate form if necessary. Contact Nichole Sorgenfrey at (563)263-5963 or email nichole@unitedwaymuscatine.org for any questions or comments you may have.