

Day of Action Registration Form

USING FILLABLE FORM TO EMAIL: DOWNLOAD THIS FORM AND SAVE ON YOUR COMPUTER, THEN ENTER INFORMATION, SAVE, ATTACH AND EMAIL TO [BCOVINGTON@UWS.ORG](mailto:bcovington@uws.org)



Individual (s)

Name: _____

Name: _____

Group (more than 2 individuals is considered a group)

Group, Business or Family Name: _____

Members Names: _____

Total Number in Group: _____

Preferred activity*:

- Assembly
- Personal Care Kit Assembly
Summer Snack Backpack Assembly
- Community Projects:
 - Playground: safety mulch, repair, painting
 - Beautification: trash pick up/landscaping
 - Gardening: planting flowers and trees
 - Small Repairs: repairs or painting

You will receive a welcome packet prior to the event with schedule, information on projects and liability waivers.

*We will do our very best to match you with your preferred activity, however, the volunteers and activities will be matched based on requests received and the needs of the community.

Main contact email address: _____

Main contact cell phone: _____

Email form to Betsy Covington at bcovington@uws.org.

Please call 216-436-2046 with questions.