

# Day of Caring Project Registration Form

United Way of the Brown County Area Day of Caring  
October 23 & 24, 2020

- 1) Name: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Address: \_\_\_\_\_  
Email: \_\_\_\_\_  
Contact name & Phone # (if different): \_\_\_\_\_  
Are you a Veteran?     Yes     No

- 2) **Please choose the project(s) you would like completed at your home:**  
***\*Due to the COVID-19 pandemic and social distancing guidelines, we are only able to complete outside projects.***

- Windows washed (outside only): Please give us the following details.  
     How many windows? \_\_\_\_\_  
     Do you have a 2-story home?                     Yes             No  
     Do you have a ladder volunteers can use?     Yes             No
- Yard work including raking leaves, mowing your lawn, pruning bushes, weeding, or repotting plants.  
Please explain \_\_\_\_\_  
\_\_\_\_\_
- Painting project: Please explain \_\_\_\_\_  
\_\_\_\_\_

***\*We can only accept small painting projects and due to the volume of requests we may not be able to complete your painting project this year.***

- Other: Please explain in detail \_\_\_\_\_  
\_\_\_\_\_

- 3) **Materials you will provide to complete project:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- 4) **Please further describe the details of your project:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*\*See next page. Signature Required.*

5) **Again, this year**

Some of our Day of Caring teams need to complete their projects on the Friday before the official Day of Caring Saturday. If you would like to be considered for Friday project assignments, please indicate below.

- I prefer my project to be completed on **Friday, October 23rd**
- I prefer my project to be completed on **Saturday, October 24th**
- No preference

6) **Photo Consent**

We would like your consent to photograph you and your property to use in promoting the Day of Caring. Please mark YES or NO below:

- YES**, United Way can take pictures of me for the Day of Caring – *complete consent below:*

I hereby authorize United Way of the Brown County Area to use any photo, any video and any other representational image taken of me on the Day of Caring for promotion including but not limited to inclusion in the annual report, on the website, in posters, brochures, videos and other materials.

Dated: \_\_\_\_\_  
\_\_\_\_\_  
(Signature)

- NO** Please do not photograph me.

8) **Sign the consent below:**

I, \_\_\_\_\_ landowner/renter, hereby authorize and consent to allow volunteers participating in the Day of Caring Program to enter upon property rented/owned, for the purpose of clean up and restoration.

**CORONAVIRUS / COVID-19 WARNING. Coronavirus, COVID-19 is a contagious virus that spreads easily through person-to-person contact. Federal and state authorities recommend social distancing and wearing a mask as ways to prevent the spread of the virus. COVID-19 can lead to severe illness, personal injury, permanent disability, and death. Participating in Day of Caring could increase the risk of contracting COVID-19.**

Dated: \_\_\_\_\_  
\_\_\_\_\_  
(Signature)

Return this form in the enclosed envelope before October 12<sup>th</sup>.