

DAY OF



Give. Volunteer. Act.

Thank you for submitting your project!
Please provide the following details:



United Way
Peterborough & District

A brief description of your agency / service:

Summary of volunteer project to be completed:

-

Where will the project take place?

-

Please provide contact details for the person co-ordinating your project:

Name

Email

Phone

of Volunteers

DAY OF



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Please list the supplies that will be provided:

-
-
-
-

What should volunteers bring?

-
-
-

Project details - What will volunteers be doing?

-

Are there any confidentiality protocols associated with this task?

Expected Duration of Project