

**"Make A Difference Day"**  
**2019 Registration Form**



Project # \_\_\_\_\_  
(leave blank)

The Town of Westport's "Make A Difference Day" will be held during the month of October, 2019. If you want your organization to participate please complete this registration form **ASAP**, and mail it to:

**"Make A Difference Day," 110 Myrtle Avenue, Westport, CT 06880 or fax it to 341-1038 or email to makadif@aol.com.** If you have any questions, please call Barbara Pearson-Rac, 203-226-1390 or email makadif@aol.com.

**Are you (Please check):**

☐ **Not-for-Profit Organization requesting volunteers for a project you are submitting**

☐ **Volunteer organization that is submitting a project**

☐ **Volunteer organization that is looking for a project \***

**Organization:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Contact Person:** \_\_\_\_\_

**Phone #:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Fax #:** \_\_\_\_\_

**Project Title:** \_\_\_\_\_ \*

**Project Details**

**Brief Description:** \_\_\_\_\_ \*

**If you are looking for a project, what types of projects interest you? (Please describe) The Make A Difference Day organizing committee will try to find a project that meets your requirements.**

**Location:** Indoors: \_\_\_\_\_ Outdoors: \_\_\_\_\_ Both: \_\_\_\_\_

**Time of Day:** Morning \_\_\_\_\_ Afternoon: \_\_\_\_\_ All Day: \_\_\_\_\_

**Length of Project:** One Day: \_\_\_\_\_ Extended: \_\_\_\_\_

**Do you have specific day(s) in mind?** Date(s) \_\_\_\_\_

**Please approximate the number of people affected or impacted by this project:** \_\_\_\_\_ \*

**Volunteer Needs\***

**Number of Volunteers needed (approximate):** \_\_\_\_\_

**Age Limits (appropriate for children?):** Children \_\_\_\_\_ Adults \_\_\_\_\_ Both \_\_\_\_\_

**Can volunteers be divided into shifts?** Yes \_\_\_\_\_ No \_\_\_\_\_

**Does the project require driving?** Yes \_\_\_\_\_ No \_\_\_\_\_

**Where should the volunteers report? (address):** \_\_\_\_\_

**What time should they report:** \_\_\_\_\_

**Is there a contact person they should report to:** Yes \_\_\_\_\_ No \_\_\_\_\_

**If yes, who?** \_\_\_\_\_

**Contact phone number:** \_\_\_\_\_

*\*If you are a volunteer organization looking for a project, do not complete "Volunteer Needs" section of this application. Also, it is not necessary to complete any questions with an asterisk (\*).*