



Student Life

*Bodwell Center for Service and Volunteerism*

## Voluntober 2018

## Project Registration

*\*Electronic version of this form is available. Please call us to be e-mailed a form or visit [umaine.edu/volunteer/programs/voluntober](http://umaine.edu/volunteer/programs/voluntober).*

Thank you for registering for UMaine's Voluntober initiative. Projects will be taking place throughout the month of October.

Please answer the following questions about your ORGANIZATION.

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

**Contact Person(s):** \_\_\_\_\_

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

**City/Town:** \_\_\_\_\_

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

**Phone Number:** \_\_\_\_\_

Date of Project/Event: \_\_\_\_\_

What time would you like the project/event to start? \_\_\_\_\_

What time would you like the project/event to end? \_\_\_\_\_

Please answer the following questions about your PROJECT LOCATION.

Please check here if this information is the same as above.

**Contact Person(s)\*:** \_\_\_\_\_

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

**City/Town:** \_\_\_\_\_

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

**Phone Number:** \_\_\_\_\_

**Emer Number:** \_\_\_\_\_

(\*Person at site for emergencies on day of project)

How many students would you like to participate in your project?

- |                                    |                                  |
|------------------------------------|----------------------------------|
| <input type="checkbox"/> 8 or less | <input type="checkbox"/> 21 – 30 |
| <input type="checkbox"/> 9 – 12    | <input type="checkbox"/> 31 – 40 |
| <input type="checkbox"/> 13 – 20   | <input type="checkbox"/> 41+     |

Please describe your proposed volunteer activities.

In the event of bad weather, would the project still occur? Yes No  
If yes, will the project have to change on account of the weather? How?

Is there access to restrooms at the volunteer site? Yes No

Is there a first aid kit available at the volunteer site? Yes No

Is your volunteer site handicap accessible? Yes No

Any additional comments?

Thank you for registering! Please send this form to:

Bodwell Center  
University of Maine  
5748 Memorial Union Room 311  
Orono, ME 04469

FAX # 581-4215  
or Email to one of the people below

If you have questions or need assistance with this process, please feel free to contact:

Lisa Morin - 581-4194 – [lisa.morin@maine.edu](mailto:lisa.morin@maine.edu) or  
Danielle Daigle 581-3097 – [danielle.marie.daigle@maine.edu](mailto:danielle.marie.daigle@maine.edu)