

MAKE A DIFFERENCE DAY

Saturday, October 22, 2016 8am-12pm



COMMUNITY PROJECT REQUEST FORM

GROUP/ORGANIZATION CONTACT INFORMATION

NAME		NAME OF CONTACT PERSON	
STREET ADDRESS		CITY, STATE, ZIP	
EMAIL ADDRESS		MAIN PHONE NUMBER	

DESCRIPTION/LOCATION OF PROJECT

PROJECT DETAILS

HOW MANY VOLUNTEERS ARE NEEDED TO COMPLETE THE PROJECT?	
WHAT TIME WOULD YOU LIKE THE PROJECT TO START AND FINISH?	_____ to _____
WHAT EQUIPMENT, MATERIALS, AND SUPPLIES ARE NEEDED TO COMPLETE THE PROJECT?	
WHAT SUPPLIES DO VOLUNTEERS NEED TO BRING TO COMPLETE THE PROJECT?	
WILL YOU PROVIDE THE EQUIPMENT NEEDED?	YES <input type="checkbox"/> NO <input type="checkbox"/>

PLEASE RETURN FORM TO COMMUNITY CENTER
Office: 34900 Oak Glen Rd., Yucaipa, Ca 92399
(909) 790-7460 ext. 330
MAIL: 34272 Yucaipa Blvd. Yucaipa, Ca 92399
DEADLINE: WEDNESDAY, OCTOBER 12, 2016

FOR OFFICE USE ONLY

Date Application Received:	Received By:
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