



Random Acts of Simple Kindness  
Affecting Local Seniors

Saturday, November 7 2020

8:30AM – 1PM

## Volunteer Information – TEAM FORM

Please complete all of the following information:

Name (Team Leader) \_\_\_\_\_ Phone: \_\_\_\_\_ (Circle: Home/  
Work/Cell)

Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_ E-mail address: \_\_\_\_\_

I am a part of (Organization/ Team Name): \_\_\_\_\_

Last Name	First Name	Age as of Nov 7, 2020	Shirt Size* (circle one)	*Parent/Guardian Signature for minors (under 18)
			YM YL S M L XL 2X	
			YM YL S M L XL 2X	
			YM YL S M L XL 2X	
			YM YL S M L XL 2X	
			YM YL S M L XL 2X	
			YM YL S M L XL 2X	
			YM YL S M L XL 2X	
			YM YL S M L XL 2X	
			YM YL S M L XL 2X	

\* Children under 18 are required to have adult supervision on the assignments

\* This form must be returned by **Monday, October 19<sup>th</sup>** to guarantee your official RASKALS t-shirt.

In case of emergency, RASKALS should notify \_\_\_\_\_ at (phone number) \_\_\_\_\_  
(Someone not participating in RASKALS)

**Please remember to bring your own yard equipment: clippers, trimmer, rake, broom – based on your client needs.  
The City provides some yard bags, window cleaner and paper towels for each team**

Please check YES \_\_\_\_\_ if you are the **TEAM LEADER** or are interested in being the **TEAM LEADER**.  
**TEAMS MUST CONTACT CLIENTS BY **Friday, October 30<sup>th</sup> 2020****

## Volunteer Waiver

(Each member of the team must complete this page. Please make copies as needed.)

I do hereby release and hold harmless the City of Fairfield Volunteer Program, supporters, officers, agents and employees and the homeowner for whom I am doing volunteer work, for any injury that I may suffer or incur as the result of my volunteering.

Name of Volunteer (print): \_\_\_\_\_

\_\_\_\_\_  
Signature of Volunteer

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of parent or  
Guardian if Volunteer is under 18 yrs.

\_\_\_\_\_  
Date

### Photo Release

The City of Fairfield Volunteer Program has my permission to use my photograph in publicity in the future.

\_\_\_\_\_  
Signature of Volunteer

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of parent or  
guardian if under 18 yrs.

\_\_\_\_\_  
Date

**\*\*Seniors rank the importance of the jobs they want done from 1-5 with 1 being the most important.** These items include: picking up sticks, washing outside windows, sweeping sidewalks, trimming shrubs, weeding, raking leaves, cleaning gutters, and other general maintenance items they want done. We would like to have the volunteers do what they can at each house within an hour. The ranking system will help make sure most seniors are taken care of and the volunteers won't get burned out at the first house.

If you are being organized into groups (such as youth group, organizational group, or school group) please make sure the name of the team is listed on the first page of this application. Individuals can **email, mail, fax or drop off their registrations by Monday, October 19<sup>th</sup>** to:

Brittany Theilman  
Fairfield Parks and Recreation  
411 Wessel Drive  
Fairfield, OH 45014  
btheilman@fairfieldoh.gov

Phone: 513-896-8439  
Fax: 867-6070

