



## Volunteer Group Information Sheet

Keep Cincinnati Beautiful would love to work with your group on a volunteer project!  
Please fill out the following information and a KCB staff member will contact you to discuss your project.

**We do require a minimum of 10 volunteers and a 2-week lead-time to organize a group project.**

Group Name \_\_\_\_\_

Contact Person for Group \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone: Day: \_\_\_\_\_ Eve \_\_\_\_\_ Fax \_\_\_\_\_

E-mail address for Contact Person \_\_\_\_\_

How many volunteers do you expect? Please include age range (Minimum of 10 required) \_\_\_\_\_

What hours do you wish to volunteer for? (Minimum of 2 hours) \_\_\_\_\_

Do you have a specific date(s) in mind? \_\_\_\_\_

Skill Level of Volunteers \_\_\_\_\_

Do you have any geographic limitations as to where the group can work? \_\_\_\_\_

What type of project would you like to do? What can we do to help make your project a great success?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What types of projects has your group volunteered for before? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do you have any special needs or any questions to ask? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please feel free to add another page as needed to explain your volunteer group needs.

Return completed form to:  
Keep Cincinnati Beautiful, Inc.  
801 Plum Street, Room 16  
Cincinnati, OH 45202  
Phone: 352-4385  
Fax: 352-4389