



171 WEST 85th STREET  
NEW YORK, NY 10024  
212-769-2850  
www.dorotusa.org

## Volunteer Return Form for DOROT's Card Making Project

Name: \_\_\_\_\_ Date of Event: \_\_\_\_\_

Group's Name (if applicable): \_\_\_\_\_ Group's website: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

### Type of Group (check one):

\_\_\_\_ Corporate

\_\_\_\_ Synagogue or other Religious Group

\_\_\_\_ Nonprofit Organization

\_\_\_\_ College or University, Circle One:

Undergraduate

Graduate School

\_\_\_\_ School Group (k-12), Circle One:

Jewish Day School

Private School

Public School

\_\_\_\_ Preschool, Circle One:

Jewish Day School

Private School

Public School

\_\_\_\_ Other: \_\_\_\_\_

### Number of Volunteer(s) - write in number of participants for each applicable category:

\_\_\_\_ # of Adults

\_\_\_\_ # of Youth - circle age group:

High School (9-12)

Middle School (6-8)

Elementary School (K-5)

Preschool

### Statistics:

1. How many cards are included in this package? \_\_\_\_\_

2. Type of cards:  Birthday  Rosh Hashanah  Thanksgiving  Chanukah  Winter  Passover

Other: \_\_\_\_\_

3. How much time did each person spend making the cards? \_\_\_\_\_ (min)

### Misc:

Please mail me a letter for my volunteer hours.

How did you hear about DOROT's Card Making Project?

DOROT's website  School/Group  DOROT staff member  Other: \_\_\_\_\_

I/we have participated in other DOROT programs before:  Yes  No

If yes, please specify: \_\_\_\_\_

Comments/Suggestions: \_\_\_\_\_

**Thank you for your comments and participation!**

**Please return this form with the handmade cards to:**

DOROT, Attn: Card Making Project  
171 West 85<sup>th</sup> Street, New York, NY 10024