



ARVBA DAY 2019

Project Information

Project Name: _____

Sponsoring Church: _____ Phone Number: _____

Project Coordinator: _____ Phone Number: _____

Project Coordinator's email: _____

(*Project Coordinator is a person from the project's sponsoring church who will be on site when ARVBA Day participants are present.)

Type of Project: (circle one)

Light Construction

Community Ministry (?)

Evangelism

Cleaning/Yard Work

Prayer Walking

Neighborhood Surveying

Back Yard Bible Club

Senior Adult Ministry

Block Party

Tree Removal

Other: _____

If a Construction Project: (please attach property owner release form)

Property Owner's Name: _____ Date: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____

1. Project Needs (paint, brushes, etc)

2. Estimated Number of Volunteers needed: _____

3. Other helpful information specific to project:
