

Double H Ranch



Community Work Day Form

The Double H Ranch sincerely thanks you for your support and generosity. Thank you for supporting our mission to provide specialized programs to children and families dealing with life-threatening illnesses. It is through your efforts that we are able to provide some very special children the opportunity to experience the magic of the Adirondacks.

- Date Available _____
- Hours Available _____
- Name of Organization/Individual _____
- Address _____
- Phone _____
- Email _____
- Total Adults (18 years and older) _____
- Total Kids (must be over 12 years of age) _____
- Are you interested in a tour of the Double H Ranch? Yes No
- Are you interested in a listing of local area restaurants/take out for lunch? Yes No
- The Double H Ranch requires that companies/organizations provide a certificate of insurance with limits no less than one million dollars naming the Double H as an additional insured.

____ Yes, we will provide a certificate of insurance prior to work date

Signature

Date

**Please return completed form to Kimberly Checchia, Development Associate, by mail to:
Double H Ranch, 97 Hidden Valley Rd, Lake Luzerne, NY 12846 or by fax to 518.696.7186**

Office Use Only

Project Assigned _____

Materials Needed _____

Double H Ranch Staff Signature _____

Jacqui Brown – Director of Operations

Phil Mance – Facilities Director