

Stronger Together



UNITED WAY GALVESTON COUNTY MAINLAND

AGENCY TOUR/PRESENTATION FORM

(circle one) M - T - W - T - F

*Note: Average time of an agency visit is 45 minutes, which includes drive time

*Tour Date: _____ *Department Time: _____ *Return Time: _____

*Company Name: _____

*Company Contact: _____ *Phone: _____

Email: _____ Fax: _____

*Number of People: _____ *How many Agencies do they want to visit? _____

Are you requesting particular agencies? _____

*Submitted By: _____ *Phone: _____

Please use a separate form for each DAY of tours. United Way staff will fill out the tour information below.

Agency: _____ **Tour Time:** _____
1. _____ **to** _____

Confirmed with: _____ Phone: _____

Location Contact: _____ Contact Phone: _____

Address: _____ Date Confirmed: _____

Agency: _____ **Tour Time:** _____
2. _____ **to** _____

Confirmed with: _____ Phone: _____

Location Contact: _____ Contact Phone: _____

Address: _____ Date Confirmed: _____

Questions???

Contact Chris Delesandri at 409-948-4211 Fax: 409-948-3309 Email: CHRISD@UWGCM.ORG

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Agency: _____ **Tour Time:** _____
3. _____ to _____

Confirmed with: _____ Phone: _____

Location Contact: _____ Contact Phone: _____

Address: _____ Date Confirmed: _____

Agency: _____ **Tour Time:** _____
4. _____ to _____

Confirmed with: _____ Phone: _____

Location Contact: _____ Contact Phone: _____

Address: _____ Date Confirmed: _____

Agency: _____ **Tour Time:** _____
5. _____ to _____

Confirmed with: _____ Phone: _____

Location Contact: _____ Contact Phone: _____

Address: _____ Date Confirmed: _____

Agency: _____ **Tour Time:** _____
6. _____ to _____

Confirmed with: _____ Phone: _____

Location Contact: _____ Contact Phone: _____

Address: _____ Date Confirmed: _____

Agency: _____ **Tour Time:** _____
7. _____ to _____

Confirmed with: _____ Phone: _____

Location Contact: _____ Contact Phone: _____

Address: _____ Date Confirmed: _____

Questions???

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