The Shuswap TRAIL ALLIANCE

Volunteer Log

EVENT: _____ **DATE:** _____

Date	DB	Activity	Start Time	End Time	Total Time	Volunteer Name Please print clearly / Phone or Email	Check here if under 19	CURRENT TICKETS HELD
						Name		
						Phone/Email		
						Name		
						Phone/Email		
						Name		
						Phone/Email		
						Name		
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						Phone/Email		
						Name		
						Phone/Email		
						Name		
						Phone/Email		

Office Use	Total Hours	Total Group #	Total Youth Hours in group	Total Youth #	Master Voly Sheet	Tracked / Budget	Project #	DB