



Sport Clubs Community Service Form

Date of Service: _____

Sport Club Name: _____

List of Volunteers:

Location of Community Service: _____

Doing:

From: _____ to _____, Total hours: _____

Contact Person of Service Organization: _____

Phone: _____

Signature of Contact Person: _____

Signature of Sport Clubs President: _____

*Note: a separate form must be completed for each day of community service completed.