

OFSC Volunteer Credit Form



Name (print): _____

Date: _____

Signature: _____

Name of Skater Volunteering for: _____

Event	Date	Volunteer Name	Volunteer Job	Hours Credit	Committee Chair Sign-Off

Total Volunteer Hours Credited _____

Please submit form in OFSC Lock Box

For more information, contact the Volunteer Chair Denise Hodgson 403-556-1478 or Lead of Event.

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