

**VANCOUVERVIPERS VOLUNTEER
HOURS TRACKING FORM**

Parents'/Guardians' Names:

- 1. _____
- 2. _____

Athletes' Registered:

- 1. _____
- 2. _____
- 3. _____
- 4. _____

Please use this form to keep a record of your volunteer hours.

- Each family must complete *a minimum of 10 hours* of volunteer hours between September 2016 and April 2017.
- There are no reimbursement for partially completed hours.
- Any additional volunteer hours are greatly appreciated.

- Please submit your completed form electronically by **April 20, 2017**. You can either submit the form by either scanning it or taking a picture. Email the image to: waterpolo@vancouverwaterpolo.com

DATE	VOLUNTEER JOB DESCRIPTION (eg: Timer, 14U game at CCAC)	# OF HOURS
		1

TOTAL # of hours: _____