Retired Senior Volunteer Program
237 26th Street #320- Ogden UT 84401
801-778-6897
Fax: 801-778-6830
E-mail: stephaniewe@weberhs.org

Month: _____ 2018

Due by the 10th

Volunteer Name: _____

Address: _____ City:_____ Zip: _____

Phone: _____

Volunteer Station: _____

Date	Volunteer Activity	Total # Miles Round Trip

I have verified that the volunteer served on the dates listed above.

Station Coordinator Signature: _____ Date: _____

_____ _____

Volunteer Signature RSVP Staff Signature

Form must be signed by Station Coordinator and Volunteer before processing