

# Vancouver Ringette Association

www.vancouverringette.ca

## Parent/Participant Volunteer Record Sheet

Players Name: \_\_\_\_\_ Division: \_\_\_\_\_

Parent Name: \_\_\_\_\_

Email address: \_\_\_\_\_ Phone number: \_\_\_\_\_

Coaches Name: \_\_\_\_\_ Manager Name: \_\_\_\_\_

Have you completed 5 hours? \_\_\_\_\_

Date	Volunteer Description	# hours	Coordinators Signature (see note 1)

### NOTES:

1. Please record your volunteer job descriptions for each activity/event and have a coordinator, team manager, head coach or our executive member sign off. Children are encouraged to volunteer where appropriate.
2. Please submit your completed record sheet by the end of the season or as soon as your 5 hour requirement is completed.
3. A Volunteer Deposit cheque will be cashed after the season ends if you are unable to complete your hours.
4. If you have any questions, please contact the president at VRAPres@gmail.com