CARY JUNIOR TROJANS

2024 VOLUNTEER HOUR LOG

Family Name: _____

Athlete Name(s) and Teams: _____

4 HOURS PER FAMILY IS REQUIRED TO RECEIVE YOUR $60 DEPOSIT REFUND

DATE	START TIME	END TIME	VOLUNTEER ACTIVITY	TOTAL HOURS	BOARD MEMBER/ COACH INITIALS

Email a scanned copy or photo of your completed volunteer log to Treasurer@caryjrtrojans.com

with subject "Volunteer Log, Family Name" by December 1 2024.