



HOMETOWN CIVITAN CLUB, INC.
**VOLUNTEER ACTIVITY FORM FOR
DONATION OF IN-KIND SKILLS AND TIME**



Information provided is purely for recognition of an individual's participation in an activity. Please return completed form to the Hometown Projects Coordinator or Secretary.

MEMBER NAME _____

CHARITY _____

CONTACT PERSON & PHONE _____

SPECIFIC EVENT & DATE _____

ONGOING PROJECT _____

Day(s) _____ Time(s) _____ Location _____

Start Date _____ Estimated Duration _____

DESCRIPTION OF SERVICE/SUPPORT _____

COMMENTS _____

Approximate # of hours donated _____ Travel Time _____ Miles _____
