



CAMPS VOLUNTEER HOURS TRACKING FORM

Volunteer Name:

Address: _____

Apt/Unit #: _____

City/Town: _____

Postal Code: _____

DIVISION: Camps

Location:

Session (Summer Camps only):

HOURS TRACKING CHART

Date	Day of the week	Time	Hours	Supervisor Signature
	Monday	8:45am – 4:15pm	7.0	
	Tuesday	8:45am – 4:15pm	7.0	
	Wednesday	8:45am – 4:15pm	7.0	
	Thursday	8:45am – 4:15pm	7.0	
	Friday	8:45am – 4:15pm	7.0	
			TOTAL HOURS:	

Please update your hours in the on-line database before submitting your forms

Please attach and submit this form, along with your completed school form to:

Volunteer Development Program
c/o: Richvale Community Centre
160 Avenue Road
Richmond Hill ON L4C 5L8

OR

Fax to:
905 737 0430

Questions or Comments, please email: volunteers@richmondhill.ca