

# UW-Whitewater Club Sports

## Community Service Performed

Return form to room 100 AFTER service performed  
Club Sports staff will file form accordingly

**\*\* SUBMIT NO MORE THAN TWO DAYS FOLLOWING YOUR EVENT \*\***

**Club Name:** \_\_\_\_\_

**Your Name:** \_\_\_\_\_

**Service Performed At:** \_\_\_\_\_  
Name or Address of Location

**Date(s) of Service:** \_\_\_\_\_

**# of Hours per Person:** \_\_\_\_\_  
Not the total number of club hours

**Describe the type of service performed**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Members performing service (first and last name, please)**

**Member 1:** \_\_\_\_\_

**Member 2:** \_\_\_\_\_

**Member 3:** \_\_\_\_\_

**Member 4:** \_\_\_\_\_

**Member 5:** \_\_\_\_\_

**Member 6:** \_\_\_\_\_

**Member 7:** \_\_\_\_\_

**Member 8:** \_\_\_\_\_

**Member 9:** \_\_\_\_\_

**Member 10:** \_\_\_\_\_

**Member 11:** \_\_\_\_\_

**Member 12:** \_\_\_\_\_

**Member 13:** \_\_\_\_\_

**Member 14:** \_\_\_\_\_

**Member 15:** \_\_\_\_\_

**Member 16:** \_\_\_\_\_

**Member 17:** \_\_\_\_\_

**Member 18:** \_\_\_\_\_

**Member 19:** \_\_\_\_\_

**Member 20:** \_\_\_\_\_

**Member 21:** \_\_\_\_\_

**Member 22:** \_\_\_\_\_

**Member 23:** \_\_\_\_\_

**Member 24:** \_\_\_\_\_

**Member 25:** \_\_\_\_\_

**Member 26:** \_\_\_\_\_

**Member 27:** \_\_\_\_\_

**Member 28:** \_\_\_\_\_

**Member 29:** \_\_\_\_\_

**Member 30:** \_\_\_\_\_

FOR OFFICE USE ONLY

**Date Received by Club Sports:** \_\_\_\_\_

