

Volunteer Report
Appleton Family Ice Center & Tri County Ice Arena

Once completed and signed, please put in the Office Drop Box located outside of the Main Office.

Incomplete and/or unsigned forms will NOT be recorded.

Event Volunteered For: _____ Date: _____

Rink Location (Circle One): Appleton Family Ice Center Tri-County Ice Arena

Volunteer's First & Last Name (Please Print Clearly):

Rink User Group / Team Name / Community Group / School Name:

Parent's First & Last Name if under 18 years:

Email & Phone Number / Parent's Email or Phone if under 18 years:

Email: _____

Phone: _____

Amount of Volunteer Hours Performed: _____

Volunteer Duties Performed:

Hours Observed By/Signature:

**If you have any questions please send an email to: michele@appletonice.org or call 920-830-7679*

For Office Use Only:

Volunteer Hours Documents: _____

Date: _____

