



THANKS FOR ALL YOU DO

PARK PARTNERS GROUP VOLUNTEER LOG

PARK NAME

DATE

GROUP NAME, ADDRESS AND TROOP # (IF APPLICABLE)

GROUP LEADER

Check one box below that describes the volunteer event, or the work you performed

Park Maintenance/Project/Clean-up

Special Event

Trail Maintenance

BSU

Landscaping (weeding, planting, garbage pick up)

List the name of each person who performed service this month. Indicate the number of hours of service for each person.

NAME

HOURS

1. _____

2. _____

3. _____

4. _____

5. _____

6. _____

7. _____

8. _____

9. _____

10. _____

Please return form to City of Bemidji Parks and Recreation Department email: parks.recreation@ci.bemidji.mn.us

