Ice Age Trail Alliance Volunteer Sign-In Sheet (B)

Date: _____ Location: _____

Event: _____ Leader: _____

Type of work: ADMIN GEN RESOU NAT RESOU CULT RESOU INTERP MAINT PROT/OPS TRAIN

Event leader: **Do not give out volunteer personal information without permission!**

Name	If you are not an IAPTF member, please specify...			Time (hours)	
	Mailing address	Phone number	Email address	Travel (round-trip)	Total