

TUDENT'S NAME:		(One Student Per Form, Please)		
ACTIVITY:				
LOCATION:				
DATE:	TIME:		=	HRS
PERSON IN CHARGE:				
THE STUDENT COMPLETED C				
SIGNATURE OF PERSON IN	I CHARGE/ INVOI	VED IN THE ACT		
SIGNATURE OF FERSON IN	I OHARGE/ INVOL	LVED IN THE ACT	VIII	

Thank you so much for being a part of our children's education!

FOR CLASS ADVISOR USE ONLY:	
POINTS CREDITED TO STUDENT? DATE:	_ INITIALS: