MEDFORD VOLUNTEER AMBULANCE, INC
ACTIVITY SHEET

Date _____ Start Time _____ Ending Time _____

Nature of Activity

☐ **Special Clean-Up**	☐ **Rig Cleaning & Washing**	☐ **Drill**
☐ **Training (Outside of MVA)**	☐ **Training (In House)**	☐ **Funeral**
☐ **Committee Activity**	☐ **Officers Meeting**	☐ **Directors Meeting**
☐ **Other (Specify)**		☐ **Parade**
DO NOT USE THIS SHEET FOR STANDBY		

Shield	Name	Signature	Shield	Name	Signature

Number of Members in Attendance_____ Name of Activity Leader _____

Signature of Activity Leader _____

Comments:_____

_____

Losap ☐ Training Officer ☐ Book ☐ Revised 173/2010 KS