



**AMERICAN RIVER
PARKWAY FOUNDATION**

*Preserving the legacy
through community stewardship*

WORK PROJECT SUMMARY

Your record of hours will help us track the efforts of community members whose work often goes unnoticed. Use the space below to tell us about the work your group performed. This form is also to notify us of any work you feel needs to be conducted within your mile. If there is a project that is larger than your group can handle, the Parkway Foundation will work to recruit volunteers to assist with the project.

Complete and return the form to the Parkway Foundation office.

Mile: _____ Steward Name: _____ Work Date: _____

Contact Person: _____ Contact Phone: _____

of Adult Vols: _____ # of Youth Vols: _____ TL Adult Hrs: _____ TL Youth Hrs: _____

Sign-in liability forms completed/submitted:

Type of Work Done: _____

Comments: _____
