Master Gardener Activity Summary Sheet

Volunteer's Name:_____

Client Name or Activity Title	Date (include year)	Activity (phone, presentation, booth, exhibit, art work, construction,)	Location (club, store name, group, Ext. Office, Fair Grounds)	Contacts						No. of Pamphlets Distributed	No. of Hours Volunteered
				White		Black		Other			
				M	F	M	F	M	F		

Training Completed

Name of the Program	Date	Subjects Covered	No. of Hrs.