

One North College Street

Northfield, MN 55057

(507) 222-4483

Community Service Report

Club Name: _____

Date Submitted: _____

Date Completed: _____

Description: _____

Date of Event: _____

Duration of Event: _____

of Team Members Attended: _____

of Participants (if applicable): _____

Club President: _____

Name

Date

Signature

Event Supervisor: _____

Name

Date

Signature