

Shelby Sharks



Volunteer Credit Form

**Please complete this form and return it the Gilpatrick folder on the pool deck.
If you have questions, feel free to contact Becky Gilpatrick at 502-647-3947.**

Swimmer's Name: _____

Meet Worked: _____

Worker's Name: _____

Position Worked: _____

Session(s) Worked: _____

Date: _____

Worker's Name: _____

Position Worked: _____

Session(s) Worked: _____

Date: _____

Worker's Name: _____

Position Worked: _____

Session(s) Worked: _____

Date: _____

Worker's Name: _____

Position Worked: _____

Session(s) Worked: _____

Date: _____

Complete below only if for Non-Meet Credit

Event Worked: _____

Hours Worked: _____

Date: _____