

**ACTIVITY INFORMATION**

DATE OF ACTIVITY: \_\_\_\_\_

STAFF MEMBER IN CHARGE \_\_\_\_\_

TITLE OF ACTIVITY \_\_\_\_\_

LOCATION ACTIVITY \_\_\_\_\_ # OF PATIENTS \_\_\_\_\_

SPONSORING ORGANIZATION \_\_\_\_\_

COSPONSORED BY \_\_\_\_\_

**THANK YOU LETTER SHOULD BE SENT TO:**

NAME \_\_\_\_\_

TITLE \_\_\_\_\_

STREET \_\_\_\_\_

CITY/STATE \_\_\_\_\_

**DOLLAR VALUE OF DONATIONS PROVIDED BY VOLUNTEERS (not items):**

CASH \_\_\_\_\_

CANTEEN BOOKS \_\_\_\_\_

REFRESHMENTS \_\_\_\_\_

COMFORT ITEMS \_\_\_\_\_

ENTERTAINMENT \_\_\_\_\_

OTHER \_\_\_\_\_

NUMBER OF VOLUNTEERS \_\_\_\_\_ TOTAL NUMBER OF HOURS SERVED \_\_\_\_\_

ADDITIONAL REMARKS \_\_\_\_\_

THANK YOU LETTER DATED \_\_\_\_\_ TYPED BY \_\_\_\_\_  
(initials)

**VOLUNTEERS – PLEASE SIGN OTHER SIDE**

### VOLUNTEER SIGN-IN SHEET

PLEASE PRINT NAME	ORGN	WORK AREA	R/S* VOL	OCC VOL	TIME IN	TIME OUT	TOTAL HOURS

### RECREATION ACTIVITY SHEET

DATE \_\_\_\_\_

VA FORM 7051b