COMMUNITY SERVICE SIGN-IN SHEET

Topic:	Date:	Time:	Property:

Required ☐Yes ☐No	Location:	Organization Presenting:

Thank you for attending! Please sign in.

Unit No.	Participant Name

Unit No.	Participant Name

I certify that the above information is true and correct to the best of my knowledge.

SIGNATURE OF PRESENTER

PRINTED NAME OF PRESENTER

TITLE OF PRESENTER

SIGNATURE OF PROPERTY MANAGER

PRINTED NAME OF PROPERTY MANAGER