SPAWP RELATED VOLUNTEER HOURS LOG LISTING

(Use multiple pages of this same logo sign in sheet with header if needed) **Completed Sheet must be emailed to:_____**

I expressly agree to indemnify and hold all related parties and landowners to this project harmless against any and all claims, demands, damages, rights of action, or causes of action, of any person or entity, that may arise from injuries or damages sustained by me. I agree to be solely responsible for my own safety and wellbeing. I understand that the organizations I am volunteering for do not provide safety supervision, instruction, or assistance for the activity, use of the land or equipment.

Project Grant Name: _____ **Location/Neighborhood/HOA:**_____ **Date Range:**_____

VOLUNTEER NAME	SIGNATURE	EMAIL	PHONE	WORK HOURS	TRAVEL TIME