

BETA CLUB POINT SHEET

(completed forms may be placed in black box in room 229)

Student name: _____

TODAY'S date: _____

Name of organization: _____

Contact person and phone number (if this was not a Beta Club activity):

Date(s) of service: _____

Number of hours of service: _____

Description of what you did in this service activity:

Signature of Student: _____

Signature of contact person: _____

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TODAY'S date: _____

Name of organization: _____

Contact person and phone number (if this was not a Beta Club activity):

Date(s) of service: _____

Number of hours of service: _____

Description of what you did in this service activity:

Signature of Student: _____

Signature of contact person: _____