

# ACDCA, Inc. Junior's Program

## Community Service Form

Name of Junior: \_\_\_\_\_

The signature and phone number is the person or organization the service was performed for.

Date of Service	Hours of Service	Type of Service Performed (describe)	Signature of person and/or organization	Contact phone number for person and/or Organization

Junior Member Signature: \_\_\_\_\_

Parent of Junior Member Signature: \_\_\_\_\_