



Family Participation Deposit Self-Reporting Form

Please fill out and submit this form whenever you complete volunteer hours to be credited to your Family Participation requirement for FVSEF. Completed form(s) can be scanned and emailed to Richard Kramer at rk@montanasky.net or mailed to FVSEF, P.O. Box 623, Whitefish, MT 59937.

Parent Name _____

Athlete Name _____

Job Completed - Please explain what you did _____

Event (Warren Miller, USSA Race Crew, etc.) _____

Supervisor - (Tim, Roy, etc.) _____

Time period work completed (X:30 p.m. - X:15 p.m.) _____

Number of hours completed towards volunteer requirement _____

Please:

- Refund my Family Participation Deposit to credit my FVSEF account
- Mail my Family Participation Deposit refund to my address on record
- Keep my Family Participation Deposit as a tax deductible donation to FVSEF!

_____ Signature _____ Date

**** Please Note**

We will collect these forms each year throughout the Summer, Fall and Winter. Completed forms must be submitted by April 30 of each year. Credits and refunds for Family Participation Deposits will be issued by May 30th of each year. Any hours completed after May 1 will count towards the following year.