University of Maryland Extension Baltimore City Master Gardeners

**Volunteer Activity SignUp (SUG) Request Form**



Please fill out this form and return it to the 3 email addresses!

UME Baltimore City Master Gardener Coordinator: [emelle@umd.edu](mailto:emelle@umd.edu)

and cc: [baltcitymg.volunteeropps@gmail.com](mailto:baltcitymg.volunteeropps@gmail.com) and [bcitymgcommunications@gmail.com](mailto:bcitymgcommunications@gmail.com)

Please remember to fill everything out correctly and completely so it can be sent once. This is to avoid confusion when a SUG needs to be corrected and re-sent.

**ACTIVITY NAME and ACTIVITY CODE (unsure of the CODE? Check the Instructions for Entering Hours Online (OTS))**

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**ACTIVITY DATE(S) AND TIME(S)**

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**ACTIVITY LOCATION**  (Please indicate; using the Location field below, if there are multiple locations.)

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**ACTIVITY DESCRIPTION** (Write a complete description of the activity. This description will be used as

the general details for your SUG request.)

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**CONTACT PERSON** (Include phone number or email address.)

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**SLOTS FOR VOLUNTEERS** Use a different line each time there is a change in date, time, number of volunteers, type or location.

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| **DATE(S)** | **TIME**  (FROM and TO) | **NUMBER OF VOLUNTEERS** | **TYPE**  (Master Gardener, Intern, etc.) | **LOCATION**  (If different from the Activity Location above) |
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