

# REGULARLY SCHEDULED SERIES TALLY SHEET

Department/Division

Title of Activity

Dates

***PLEASE NOTE: TO ENSURE CORRECT SPELLING OF PARTICIPANT’S NAMES, PLEASE MAKE***

***SURE ALL NAMES ARE TYPEWRITTEN. NO HANDWRITTEN FORMS WILL BE***

***ACCEPTED.***

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| **PARTICIPANTS** | **DATES TOTAL** | | | | | | | | | |
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