Loggers Chapter Name_____ Meeting Date _____

Subject: BMP # of hours_____, CSAW # of hours _____, Other _____# of hours _____

Sign In Sheet

Name (print)	Signature	Company	Email Address	**Cell Phone Number (For sending text messages for meetings.)**

Please return to Gayla Fleming within 1 week of your meeting. Fax: 740-297-4153 ▪ Email: Gayla@OhioForest.org
Mail: OFA ▪ 507 Main St Ste 200. ▪ Zanesville, OH 43701