

**GRINDSTONE 100  
SERVICE REQUIREMENT REPORT FOR 2009**

Please complete this form in its entirety with postmark no later than September 12, 2009.

NAME: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

DATE OF WORK: \_\_\_\_\_ NUMBER OF HOURS: \_\_\_\_\_

BRIEF DESCRIPTION OF WORK DONE:

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-----**CERTIFICATION BY AUTHORIZED PERSON**-----

PRINT NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_

SIGNATURE OF AUTHORIZED PERSON: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

DATE: \_\_\_\_\_

**\*\* REMEMBER \*\***

You must also include a copy of race results showing the applicant has successfully completed a 50 mile race or longer (within time limits) not before October 2007.

**MAIL COMPLETED REQUIREMENTS TO:**

Dr. Clark Zealand

1035 Avalon Dr.

Forest, Virginia 24551

**ATTN: GRINDSTONE SERVICE REPORT**