



SFTC Key Log Contract

Date To Be Picked Up: _____

Picked Up By: _____

Date To Be Used: _____

Unit #: _____

Date To Be Returned: _____

Person Returning: _____

Location Key Log will be used: _____

Unit Leader: _____ Phone: _____

I, _____ have confirmed with _____ that we
(Unit Leader) (Location to be used)

_____ have the permission to use the Key Log at their facility.
(Unit #)

I, _____ agree to have each swimmer watch the safety video before entering the pool
(Unit Leader)

and confirm this was completed on _____ at _____ am/pm.
(Date) (Time)

This contract is approved and recorded with the understanding that all persons using the Key Log will abide by the rules and regulations of the Santa Fe Trail Council.

By: _____ Council Position: _____