Member Name:			Date Submitted					Forms may be submitted at the monthly D.A.N.	
Instructions: (1) Enter Date of Activity in 1st Column (2) Check off Appropriate Activity. (3) Total Rows Prior to Submission									
Date of Activity / Participation (MM/DD/YYYY)	Attend the Monthly DAN Meeting	Conduct a Peer Visit	Conduct Peer Follow Up Phone Calls	Bring an Amputee Guest to a DAN Meeting	Attend 3rd Saturday @ Milo's	Attend Saturday Swim @ Bachman Pool	Host or Organize a Group Activity*	Attend an Outside Evenf*	Other Activity or Event*
Points per Activity Participated In:									_
Total Points for Month / Period									

D.A.N. Appreciation Points Program - Activity Points Submission Form

Notes:

1- See "D.A.N. Activity Points Award Chart" or a D.A.N. Board Member for Additional Information or Clarification.

<sup>2-</sup> Add additional pages if required.

<sup>\*</sup> Subject to Board Review: MUST be reviewed AND APPROVED by the D.A.N. Board PRIOR TO THE ACTIVITY OR EVENT TO RECEIVE POINTS.