



# Fairfax County Park Authority Adapted Skating Training Documentation

## Adapted Skating Online Training

I have read and reviewed the training document provided and will adhere to the designated policies.

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Volunteer Name

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Date

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Parent/Guardian Name – Required if the volunteer is under 18 years of age.

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Date

Please send the signed training document to [Diane.Alvin2@fairfaxcounty.gov](mailto:Diane.Alvin2@fairfaxcounty.gov)