

WVSTA Trail Worksheet

Date: _____

Send a copy to: WVSTA
 Attention: Honors & Awards Chair
 PO Box 4042
 Charleston, WV 25364

Trail Name: _____

Or to *Newt Harman, 406 Weimer Ave., St. Albans, WV 25177*

Section Description: Initial Trail Reroute Maintenance

Name of topo quads: _____

Name of public land: _____

Work Type	Approx. Miles	Participants	Hrs. Worked	Hrs. Traveled
Scouting	_____	_____	_____	_____
Flagging	_____	_____	_____	_____
Blazing	_____	_____	_____	_____
Clearing	_____	_____	_____	_____
Trail Digging	_____	_____	_____	_____
Construction	_____	_____	_____	_____
Mileage Wheel	_____	_____	_____	_____
Litter Pick-Up	_____	_____	_____	_____
Total Miles (miles of trail worked)	_____	_____	_____	_____
work hike leader and phone				
total hours worked and traveled:			_____	_____
total on public land:			_____	_____

This section needs: