

SFTGG Tour Record for Certification

Candidate Name: _____ Telephone: _____

Company Worked for: _____ Telephone: _____

	DATE	ASSIGNMENT & PROGRAM NAME	CATEGORY
		sample: Wine Country tour / xyz company	
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			

Account Manager Signature: _____

Total Assignments this Page: _____

Tours: SF City Tours: _____ Wine Country: _____ Muir Woods: _____ Other: _____

Programs: Airport: _____ Hospitality: _____ Shuttles: _____ Dinner Transfers: _____

SFTGG Programs Attended: _____

