

Emergency Contacts	<u>Emergency_Contact_ID</u>	First_Name	Last_Name	Phone_Number	Vol_Relationship
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Volunteers	<u>Volunteer_ID</u>	First_Name	Last_Name	Date_Entered	Phone_Number	Preferred_Contact_Method	Date_of_Birth	Employer	Medical_Concerns	<u>Address_ID</u>	<u>Emergency_Contact_ID</u>
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Address	<u>Address_ID</u>	Street	City	State	Zip
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Volunteer Training	<u>Volunteer_ID</u>	<u>Training_ID</u>
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Trainings	<u>Training_ID</u>	Type	Date	Topic	<u>Taught_By</u>
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Event Volunteers	<u>Volunteer_ID</u>	<u>Event_ID</u>	Time_In	Time_Out
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Donation Centers	<u>Donation_Center_ID</u>	Name	Street	City	State	Zip
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Employees	<u>Employee_ID</u>	First_Name	Last_Name	Phone_Number	Email	<u>Address_ID</u>	<u>Donation_Center_ID</u>
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Event Employees	<u>Employee_ID</u>	<u>Event_ID</u>	Time_In	Time_Out
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Events	<u>Event_ID</u>	Date	Notes	<u>Donation_Center_ID</u>	Start_Time	End_Time
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Event Bikes	<u>Event_ID</u>	<u>Bike_ID</u>	Work_Done	Notes
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Bikes	<u>Bike_ID</u>	Type	Parts_Needed	Parts_Replaced	Safety_Check
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