

Post Clean Up Report



To be completed each time an individual/group cleans and maintains a park or trail. Please turn in no later than the 30th of each month. If no activities were completed, please provide the adopted park/trail, group/organization involved, and check box at the bottom of the page.

Activity Date: _____ Adopted Park/Trail: _____

Group/Organization/Individual: _____

Contact Person (Group Leader): _____

Primary Contact Phone(s): _____

Total Number of Volunteers: _____ Total Time Worked: _____

Total Number of Bags Collected (trash or weeds): _____

What other activities did you complete during your work day? (ex: inspections, trash removal, weeding, etc): _____

What was the general condition of the adopted park/trail? _____

List any items of concern that may require maintenance attention: (excessive erosion on trail, broken sprinkler heads, graffiti, broken equipment, drug paraphernalia, dead trees, etc – please provide specific location): _____

Have all the necessary forms/policies been submitted for all volunteers? Yes No

Our group did not participate in any work this month:

