




CITY OF TEMPE ADOPT-THE-LAKE VOLUNTEER (ORGANIZATION)



Organization:		
Contact Person:		
Address:		
City:	State:	Zip:
Phone: ()	Mobile: ()	Fax: ()
Email:		

Information about group

Total number of participants:							
How many in each age group?	(10-17)	(18-30)	(31-60)	(61+)			
Days Available:	<input type="checkbox"/> M	<input type="checkbox"/> T	<input type="checkbox"/> W	<input type="checkbox"/> Th	<input type="checkbox"/> F	<input type="checkbox"/> Sa	<input type="checkbox"/> Su
Interest:	<input type="checkbox"/> Trail maintenance	<input type="checkbox"/> Park maintenance	<input type="checkbox"/> Trash/litter abatement				
Please list any special skills that people in your group can provide:							
Describe any special needs of the group in order to participate:							
How often would your group like to participate? (If a section of the lake is assigned.)							
Why we want to volunteer for the City of Tempe:							

<p>Mail to: City of Tempe Parks & Recreation Department Attn: Edith Ross 3500 S. Rural Road Tempe, AZ 85282</p>	 <p>Fax to: (480) 350-5058 Questions: (480) 350-2952</p>
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