DEPARTMENT OF PARKS AND RECREATION



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Adopt-A -Park Program Dates & Activities Document 5

Adopting Organization (Please Print):	
Designated Representative (Please Print):	
Contact Information:	
Home (Check One): ☐ Phone ☐ Mobile	
E-mail address:	Fax No.:
Work (Check One): ☐ Phone ☐ Mobile	
E-mail address:	Fax No.:
Address (Please Print):	
Street City Zip	
Activity	<u>Dates</u>
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