



## Adopt A Park/Greenway Progress Report

Basic Information	
_____	_____
Name of Park or Greenway Adopted	Project Coordinator (if different from adoption coordinator)
_____	_____
Group Adopting Location	Project Coordinator's Daytime Phone Number
_____	_____
Adoption Coordinator	Date Work Performed
_____	_____
Adoption Coordinator's Daytime Phone Number	Time Work Performed
Project Description:	
_____	
_____ Number of volunteers involved for a total of ____ Volunteer hours.	
Results	
_____ bags of trash collected and left at _____	
_____ bags of recycling collected and left at _____	
Other tasks completed: _____	
Tasks still to be completed: _____	
Adoption/Project Coordinator Comments:	
_____	
Town of Chapel Hill Parks and Recreation Staff Comments:	
_____	
Maintenance or Security Issues	
Examples: graffiti, broken equipment, vandalism, dead/damaged trees or shrubbery, missing/damaged bollards, fencing or locks, drug paraphernalia.	
Internal Use Only:	
Security Follow-up: _____	
Parks Staff Coordinator: (Initials/Date) _____	
Comments:	
_____	