



Adopt-A-Trail Program Quarterly Report

Volunteer/Group Name: _____

Address: _____

Phone: _____ Email: _____

Adopted Greenway Trail: _____

Please complete the following chart to report volunteer activities for this quarter. If more space is needed, you can submit more than one report.

Date	Time	Hours	# of Volunteers	# of trash bags collected

Total hours served: _____

Park/Trail Observations

Please let us know of any problems you see at your adopted park/trail site. Call 911 with all emergencies.

I verify that the information listed above is correct and that all volunteer activities performed during this quarter are in compliance with my Adopt-A-Trail agreement and all policies, procedures, and regulations of the Town of Knightdale Parks, Recreation, and Cultural Programs Adopt-A-Trail program.

Volunteer Name (Printed)

Volunteer Signature

Date

Please email forms to: Austin Conner
Recreation Activities Coordinator
Austin.conner@knightdalenc.gov
919-217-2251

