

Park District of La Grange Adopt-A-Park Application

ORGANIZATION:

(As it is to appear on your application)

GROUP CONTACT PERSON:

(Must be at least 18 years old)

TITLE OR POSITION:

EMAIL ADDRESS:

PHONE NUMBER:

MAILING ADDRESS:

ESTIMATED NUMBER OF PARTICIPANTS:

PREFERRED ADOPTION SITE/PARK

SECONDARY ADOPTION SITE/PARK:

TENTATIVE STARTING DATE:

STATEMENT OF AGREEMENT:

As a representative of this organization, I have read and agree to abide by the guidelines and safety recommendations as put forth by the Park District of La Grange regarding the Adopt-A-Park Program.

SIGNATURE: _____ DATE: _____

Please email completed applications to claudiagalla@pdlg.org for review

