

GROUP ID _____

Clean-Up Report

Please record all clean-up events on this form and return it to the address below after completing the form.

From: _____

Contact Name Phone Number/Email

Address

Organization Name: _____

Clean-Up Record:

Clean-Up Date	Number of Volunteers	# Hours	# Bags	Estimated Weight	Unusual/ Large Items	Incidents/ Injuries	Observations
						<input type="checkbox"/> Yes <input type="checkbox"/> No	
						<input type="checkbox"/> Yes <input type="checkbox"/> No	
						<input type="checkbox"/> Yes <input type="checkbox"/> No	
						<input type="checkbox"/> Yes <input type="checkbox"/> No	
						<input type="checkbox"/> Yes <input type="checkbox"/> No	
						<input type="checkbox"/> Yes <input type="checkbox"/> No	
						<input type="checkbox"/> Yes <input type="checkbox"/> No	
						<input type="checkbox"/> Yes <input type="checkbox"/> No	

RETURN THIS FORM TO:
Adopt-a-Street Coordinator

City of Surrey, Eng. Operations
6645 – 148 Street
Surrey, BC V3S 3C7

Phone: 604-590-7272
Fax: 604-591-7836
Email: AASProgram@surrey.ca