



MONTHLY ACTIVITY REPORT

Park Name: _____

Adopter Name: _____

Activities Performed:

Cleanup(s) / Date(s): _____

Beautification(s) / Date(s): _____

Park Watch: *Please describe concerns and who you contacted/date(s)*

Were the concerns resolved? ____Y ____N

Please Indicate Monthly Totals Below:

of Volunteers: _____ # Youth under 18: _____

Bags of litter collected: _____

Playgrounds cleaned: _____ # Walking Trails cleaned: _____

Flower Beds cleared/weeded: _____ # Plants, seeds, etc. planted: _____

Misc Activities (*please describe*): _____

Report filed by: _____

Date: _____

If you have any questions call 901.636.4410

Please fax or email to 901.523.0652 or city.beautiful@memphistn.gov

