

## Adopt-A-Street Volunteer Activity Report

Please attach Volunteer Activity Roster to this Report. Name: \_\_\_\_\_ Organization: \_\_\_\_\_ Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_ Date of Activity: \_\_\_\_\_ Start Time: \_\_\_\_\_ End Time: \_\_\_\_\_ How many total volunteers participated? \_\_\_\_\_ How many bags of trash were collected? Please describe and give approximate location of any collected bags and if there were any large, heavy or bulky items that the City needs to collect? Were there any hazardous, toxic, or otherwise unacceptable items (needles, syringes, broken glass, chemicals, etc.) that were marked with flags and need to be collected by the City? Please describe and give approximate location. Were there any unusual incidents or injuries during the clean up?

To activate insurance, please return this form and Volunteer Activity Roster within 3 days:

Scan & Email:

• tdonati@kentwa.gov

pwops@kentwa.gov

or Mail:

City of Kent 220 4<sup>th</sup> Ave S

Kent, WA 98032

Attn: Tony Donati/Adopt-A-Street Program

or Fax: 253-856-6500