

Adopt A Block Application

Date		
Name of Group		
		This name will appear on your sign.
Contact Person	· · · · · · · · · · · · · · · · · · ·	
Address		
Contact Phone #	<i></i>	
Block to be Ado	pted	
	***************************************	For example: 100 S. Taylor
Planned Start D	ate	
I pledge that litt	er on our Ado	ppted Block will be picked up at least once each month.
Signature		
Checklist: (Of	course, addi	itional materials are available upon request.)
		Bags (10 to start)
		Gloves (10 pairs to start)
		Safety Vests (2 to start)
		Safety Procedures (Helpful tips)
		Report Forms (One per month, submit quarterly)
		Survey Form (submit with six-month report)

Please mail applications to Keep Oak Park Beautiful 201 South Boulevard, Oak Park, IL 60302 Or fax to to 708.358.5711