



ADOPT-A-STREAM PROGRAM

CITY OF BELTON
520 Main Street
Belton, MO 64012
816-331-4331
www.belton.org

Form 3: Request for Clean-Up Event

Group Name _____

Volunteer Group Leader Name _____

Volunteer Group Leader's Telephone Number _____

Volunteer Group Leader's E-mail Address _____

Proposed Date of Clean-Up Event _____

Stream Location _____

Central Meeting Location _____

Approximate Number of Volunteers _____

Please return form at least two (2) weeks prior to stream clean-up event to:

Phone #: _____

E-mail Address: _____