

Service Project Request

Name of Organization:

Address of Organization:

Number of youth in group: _____ Number of adults in group: _____

Average age of youth: _____

Park Requested: _____ Date _____

1st Choice: _____

2nd Choice: _____

Group Coordinator

Name: _____

Address: _____

Daytime Phone Number: _____

Cell Phone Number: _____

Describe your request: (i.e. service project and camp out, be as specific as possible, if you have an idea of how your group might assist us please describe)

Notice: All service projects must be coordinated and approved in advance. Campsite Fees will only be waived on Non-Reservable Campsites or in designated group camp areas with volunteer service from the group. Example of Volunteer Service: Trail Rehab, Park Maintenance, Construction, etc. The number of volunteer hours and specific tasks will be determined by the volunteer coordinator for fees to be waived.

Please submit requests 30 days prior to date of event. We will work with each group on a first come first serve basis.

This application **does not** give approval for the above request.