

WEST VIRGINIA



WEST VIRGINIA STATE PARKS & FORESTS ADOPT-A-TRAIL PROGRAM APPLICATION

CONTACT INFORMATION

Organization Name: _____

Representative Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Email: _____

Requested Park/Forest Name: _____

Requested Trail Name/or Trail Location: _____

Starting Point: _____ Ending Point: _____

PARTICIPANT INFORMATION

Number of Participants: _____ Under 18 _____ Over 18

The organization, business, family or group named above has read and agrees to the terms and conditions of the Adopt-A-Trail Program:

Representative's Signature: _____ Date: _____

ADMINISTRATIVE APPROVAL

(For WVDNR Use Only)

WVDNR Approval: _____ Date of Approval: _____ Expiration: _____

Park/Forest Name: _____ Trail Name/Location: _____

Copies To: Organization; Parks & Recreation Section; Area Superintendent. Ensure all volunteers have completed a Volunteer Agreement

MAIL COMPLETED APPLICATIONS TO:

West Virginia State Parks

Adopt-A-Trail Program

State Capitol Complex, Building 4, 112 California Ave.

Charleston, WV 25305-004

almost heaven

State Capitol Complex | 112 California Ave. | Building 4 | Charleston, WV 25305-004

ph (304) 558-2764 | fax (304) 558-0077 | WVstateparks.com    