



Great American Cleanup Form

Yes! We picked up trash.

Individual or Group Name: _____

Contact Person Name: _____

Address: _____

Email: _____

Phone: _____

No. of Bags Collected: _____

Number of people participating: _____ Date of Pick-Up: _____

Area of Pick-Up: _____

Amount of time contributed (No. of hours x No. of volunteers: _____

Unusual items found: _____

I'd like to help with future events: yes _____ no _____

Please send me info about "Adopt-A-Spot": yes _____ no _____

This event could be improved by: _____

Parts of the City that need pick-up: _____

I need info on where to take recyclables: yes _____ no _____

Other Comments: _____

Please return this form to event headquarters or City Hall | Thank You!

City of Hogansville, 400 East Main St, Hogansville GA 30230 – 706-637-8629
www.cityofhogansville.org www.facebook.com/HogansvilleCityHall