



ADOPT A ROAD APPLICATION

"Together, we make a clean Forest Park"

Date:	
Last Name:	
First Name:	
Address:	
Contact #:	
Email address:	
Group Affiliation:	
Name to be placed on Adopt A Road Sign :	
Desired Location(s) to Adopt:	
Signature	Date
*** Consent of Parent or Guardian if Volunteer is	

Return application via mail:

Under Age 15 ***

Forest Park City Hall
Executive Office
Attention: Adopt A Road
745 Forest Parkway
Forest Park, GA 30297

Return Application via email:

Tenisha Dixon tdixon@forestparkga.gov

Marsha Johnson majohnson@forestparkga.gov

Attention: Adopt A Road