

Project ReCreation Volunteer Workday Request

Facility Personnel *Please help us get to know you.*

Facility Name: _____ Phone: (415) _____

Facility Address: _____

Facility Cross Streets: _____ District: _____

Facility Hours: *[check days open]*

Monday	<input type="checkbox"/>	Hours: _____	Friday	<input type="checkbox"/>	Hours: _____
Tuesday	<input type="checkbox"/>	Hours: _____	Saturday	<input type="checkbox"/>	Hours: _____
Wednesday	<input type="checkbox"/>	Hours: _____	Sunday	<input type="checkbox"/>	Hours: _____
Thursday	<input type="checkbox"/>	Hours: _____			

Requesting volunteer workday be scheduled for: Weekend morning Weekday Morning Either OK

Best Month(s) for workday: Mar Apr May Jun Jul Aug Sept Oct

Quadrant Supervisor: _____ Phone & email: _____

Recreation Supervisor: _____ Phone & email: _____

Recreation Director: _____ Phone & email: _____

Assistant Recreation Director: _____ Phone & email: _____

Park Section Supervisor: _____ Phone & email: _____

Gardener: _____ Phone & email: _____

Custodian: _____ Phone/ & mail: _____

This site serves residents of which neighborhood(s): *(Check all that apply)*

San Francisco [Citywide]	<input type="checkbox"/>	Noe Valley	<input type="checkbox"/>
Bayview	<input type="checkbox"/>	North Beach	<input type="checkbox"/>
Chinatown	<input type="checkbox"/>	Potrero Hill	<input type="checkbox"/>
Civic Center	<input type="checkbox"/>	Richmond	<input type="checkbox"/>
Excelsior	<input type="checkbox"/>	South of Market	<input type="checkbox"/>
Fillmore	<input type="checkbox"/>	Sunset	<input type="checkbox"/>
Glen Park	<input type="checkbox"/>	Tenderloin	<input type="checkbox"/>
Haight	<input type="checkbox"/>	Visitacion Valley	<input type="checkbox"/>
Hunters Point	<input type="checkbox"/>	Western Addition	<input type="checkbox"/>
Ingleside	<input type="checkbox"/>	Other _____	<input type="checkbox"/>
Mission	<input type="checkbox"/>		

SAN FRANCISCO PARKS TRUST
Project ReCreation

Facility Assets

Please help us get to know your facility. (Check all that apply)

Parking	<input type="checkbox"/>		Bathrooms	<input type="checkbox"/>	
Gymnasium	<input type="checkbox"/>		Picnic Area(s)	<input type="checkbox"/>	# _____
Softball Field(s)	<input type="checkbox"/>	# _____	Bleachers	<input type="checkbox"/>	# _____
Multi-Use Playfield(s)	<input type="checkbox"/>	# _____	Soccer Field(s)	<input type="checkbox"/>	# _____
Tennis Court(s)	<input type="checkbox"/>	# _____	Basketball Court(s)	<input type="checkbox"/>	# _____
Landscaped Area	<input type="checkbox"/>				
Feature Garden	<input type="checkbox"/>	(i.e., Children's Garden, Butterfly Garden) Specify: _____			
Hardscaped Area	<input type="checkbox"/>				
Blacktop games	<input type="checkbox"/>	(i.e., Hopscotch, 4-square) Specify: _____			
Children's Playground(s)	<input type="checkbox"/>	# _____	Specify Ages: _____		
Off-leash Dog Area	<input type="checkbox"/>				

Please help us understand the projects you'd like Project ReCreation Volunteers to assist with.

Workday Requested By:

Print Your Name _____

 Your Signature

 Date

 Quadrant Supervisor Signature

 Date

THANK YOU for requesting a San Francisco Parks Trust Project ReCreation volunteer workday.

Submit your completed request to:

San Francisco Parks Trust
 501 Stanyan Street
 McLaren Lodge in Golden Gate Park, Second Floor
 San Francisco, CA 94117

OR email to patriciae@sfpt.org

You can download a request form from our website: www.sfparkstrust.org