



# Champlain Area Trails Trail Adopter Monthly Report

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Trail Name: \_\_\_\_\_

Number of Times on Trail: \_\_\_\_\_ Hours Spent on Trail: \_\_\_\_\_

## Tasks Performed:

\_\_\_\_ Put Up/Replaced Trail Markers

\_\_\_\_ Picked Up Litter

\_\_\_\_ Cut Back Branches

\_\_\_\_ Cut Grass/Vegetation

\_\_\_\_ Removed Branches/Logs from Trail

\_\_\_\_ Other: \_\_\_\_\_

Problems, Infrastructure Needs (Bridge/Boardwalk/Signs), etc. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Other: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_