



Date

2010 CHAPTER PROJECT APPLICATION FORM

Project Name

STREET

Contact Name

City, Zip

Phone/Fax

Email

Scope of Work: Can the project be built in one day? How difficult is the project/access?
Number of Volunteers Needed?

Design/Pictures: Is there a design available or do we need to provide one? Pictures?

Timing: How soon is the project ready to go?

Funds/Budget: materials need to be provided by applicant. All labor is provided by CLCA members? Are there funds available for materials?



_____ Date

Level of Need:

Support Staff: Is there a support network within the organization to provide lunches, drinking water, etc...

Facilities: Are there restroom facilities available? Debris Box? Storage Access? Electricity?

Maintenance: How will maintenance be handled short-term _____, long-term _____.

Exposure: Is the project located in an area with high visibility? Will we get any published credit for the project? Is someone available to work with local news agencies to publish the event?

Notes:

Please mail, fax or email application to me at:

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