

Operation Restoration- Long Bay, Beef Island Organization Sign-up Form

This form should be completed by organizations, including NGOs, community-based organizations, service organizations, religious organizations, youth groups etc.

VOLUNTEER DETAILS

Organization name: _____

Contact person: _____

Contact person's phone: _____

Contact person's email address: _____

(Email addresses will only be used by the Ministry to send more detailed instructions to volunteers.)

Number of volunteers: _____

Number of school-aged volunteers:

(Note: Sufficient adult supervision must be provided for school-aged children).

Primary School _____

Secondary School _____

VOLUNTEER ACTIVITIES

Select the activities your organization would like to participate in:

Seagrape tree planting

Invasive tree removal