

**MANGAUNG METROPOLITAN MUNICIPALITY**



**ADOPT – A – PARK APPLICATION FORM**

**Group / Organization Particulars**

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

Physical Address:

\_\_\_\_\_  
\_\_\_\_\_

Phone Number: \_\_\_\_\_

E Mail Address: \_\_\_\_\_

Fax Number: \_\_\_\_\_

Area / Park Want to Adopt: \_\_\_\_\_

\_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Adoption Information ( For Office use only)

Assigned Park: \_\_\_\_\_

Location: \_\_\_\_\_

Adoption Date : From : \_\_\_\_\_ To : \_\_\_\_\_

Complete form and hand in at the Parks Offices situated in Zola Buddstreet , Willows or fax it to 051-4127011 or mail it to [dawie.coetsee@mangaung.co.za](mailto:dawie.coetsee@mangaung.co.za)