

Pollinator Pledge

Schuylkill River Greenways NHA
Operation Pollination



Main contact name	Number of members
Organization (if applicable)	Which best describes you? <input type="checkbox"/> Non-profit organization <input type="checkbox"/> Service club <input type="checkbox"/> Neighborhood association <input type="checkbox"/> Govt/public entity <input type="checkbox"/> Business <input type="checkbox"/> Individual <input type="checkbox"/> Other: _____
Street address	
City State Zip Code	
Email address	
Website	Phone

Organization/ Individual commits to the following activities in support of the Pollinator Resolution: (e.g. You can define what you will do in support of pollinators. Examples include but are not limited to converting x square feet to native pollinator-friendly habitat or planting x number of pollinator-friendly plants. The more measurable the action the better, as SRG NHA will work with you to track what has been accomplished at the end of each year.)

My signature represents my commitment to the Pollinator Resolution.
X _____
Signature Date

Please mail completed forms to Schuylkill River Greenways Attn: Sarah Crothers 140 College Drive Pottstown, PA 19464 or complete the online form at bit.ly/SRGPollinatorPledge

