## **COMMUNITY SERVICE CERTIFICATION**

NAME:

SCHOOL / ORGANIZATION:

**ADDRESS:** 

**TELEPHONE:** 

**EMAIL:** 

THIS IS TO CERTIFY THAT THE ABOVE-NAMED PERSON HAS PARTICIPATED INTHE BROWARD COASTAL CLEANUP EVENT ONFROMTOAS A COMMUNITY SERVICEVOLUNTEER.

**COASTAL CLEANUP SITE LOCATION:** 

NUMBER OF HOURS DONATED BY VOLUNTEER:

COASTAL CLEANUP SITE COORDINATOR:

Print Name

COASTAL CLEANUP SITE COORDINATOR:

Signature

MARK HARTMAN, COASTAL CLEANUP ZONE CAPTAIN Resilient Environment Department - Natural Resources Division



(CoastalCU2012-Certificate form.doc)