



# Pollinator Partner Pledge



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

Phone No. (Mobile or Land): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

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

Website: \_\_\_\_\_

Check applicable description:

Business  Church  Civic Club  Governmental/Public  Individual

School/College  Non-Profit  Other \_\_\_\_\_

If group, indicate number of members: \_\_\_\_\_

Describe anticipated project: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I/We Pledge to Participate in a pollinator program, project or activity between April 2022 and April 2024 and report results to the Hillsborough Soil and Water Conservation District for recognition as part of the Hillsborough 100 Conservation Challenge in partnership with the Rotary Club of Brandon Global Eco and Operation Pollination. *(Please sign below.)*

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

**Return signed Pollinator Partner Pledge to Betty Jo Tompkins. Email: bjt6890@yahoo.com**

**A Hillsborough 100 Conservation Challenge Action Awareness Project**