



Michigan State University Extension, Master Gardeners  
 Macomb County Public Works  
 And the Charter Township of Clinton

Invite you to participate in the:



# Clinton River Spillway Bike Path Project

*An award winning volunteer effort to beautify, enhance and protect the environment*

## 2011 Project Days

<p><b>Saturday, May 21</b>          Spring cleaning &amp; planting          Co-sponsored with Clinton River Watershed Council "River Day"</p>	<p><b>Saturday, July 16</b>          Summer maintenance</p>	<p><b>Saturday, Sept. 17</b>          Fall clean-up &amp; plant division          Co-sponsored with Clinton River Watershed Council "River Clean up"</p>
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- Time:** The schedule for all 3 workdays is: 8 am- registration, 8:30 - education, 9:30 to 3:30 –gardening/cleanup.
- Location:** Northwest corner of Harper and Wellington Crescent in Clinton Township.
- Bring:** Weeders, rakes, shovels, pruners, sunscreen and smiles!
- Contact:** Sandra Richards, MSUE (586)469-6440

***Students can receive community service credits!***

*For more project info: [www.macombcountymi.gov/msuextension/mgbikepathproject.htm](http://www.macombcountymi.gov/msuextension/mgbikepathproject.htm)  
 For free environmental education programs contact- Macomb County Public Works: (586)466-4016  
 For the Clinton River Watershed Council "River Day" and "River Cleanup" project info: [www.crwc.org](http://www.crwc.org)*

Macomb MSU Extension programs and materials are open to all without regard to race, color, national origin, gender, religion, age, disability, political beliefs, sexual orientation, marital status, or family status. MSUE, U.S. Dept. of Agriculture, and Macomb County Board of Commissioners cooperating. MSU is an affirmative action equal opportunity employer.

### Registration Form

Name: \_\_\_\_\_ Master Gardener?  Y  N

Mailing Address: \_\_\_\_\_ city \_\_\_\_\_ zip \_\_\_\_\_

Telephone: ( ) \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Teacher or Student? \_\_\_\_\_ School Name: \_\_\_\_\_

Community Service Project Name \_\_\_\_\_

I want to register for the:  Spring  Summer  Fall Project

I agree to work on this project at my own risk and to hold all organizing parties and local authorities harmless:

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

Guardian Signature (if under 18): \_\_\_\_\_ Date: \_\_\_\_\_



**Mail to:**  
 MSUE/Bikepath Project  
 21885 Dunham Road,  
 Suite 12  
 Clinton Township 48036  
*Or  
 bring with you on  
 project day.*