



Downtown Morehead City Inc. www.downtownmoreheadcity.com

Downtown Morehead City, Inc. Adopt a Block Supplies Check-Out Form

Date Signed Out: _____

Date Returned: _____

The supplies listed below have been checked out to:

Organization: _____

Address: _____

Contact Name: _____

Contact Phone Number: _____

Contact Email: _____

Number of Items	Items
	Grabbers
	Buckets
	Gloves (do not have to return if used)
	Clipboards
	Vests
	Garbage Bags (do not have to return if used)
	Other:

Date of Clean-Ups:

1. _____
2. _____
3. _____
4. _____

I agree to provide reasonable care and safekeeping of the supplies and return them on the agreed upon date.

Contact Person Signature: _____

Contact Person Printed Name: _____

DMC, Inc. Representative Signature: _____

DMC, Inc. Representative Printed Name: _____