

## TRAIL RECOMMENDATIONS

Name: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Email: \_\_\_\_\_

**TRAIL RECOMMENDATION:**

1) Trail location description (and/or draw trail on map located on back of this worksheet):

2) Why would this be a good addition to the trail system?

3) Type of trail (please circle preference)

Gravel Path/ Concrete/ Stairs/ Natural Surface/ No Preference/ Other: \_\_\_\_\_

4) How would you use this trail (check all that apply)?

Walking                       Running                       Commuting                       Biking  
 Bird Watching                       Hiking                       Wildlife Viewing  
 Dog Walking                       Rollerblading                       Mountain Biking

5) What Open Space properties do you use? How do you use it? How often?

6) Did you mark this trail location on the map? (please circle)

Yes or No

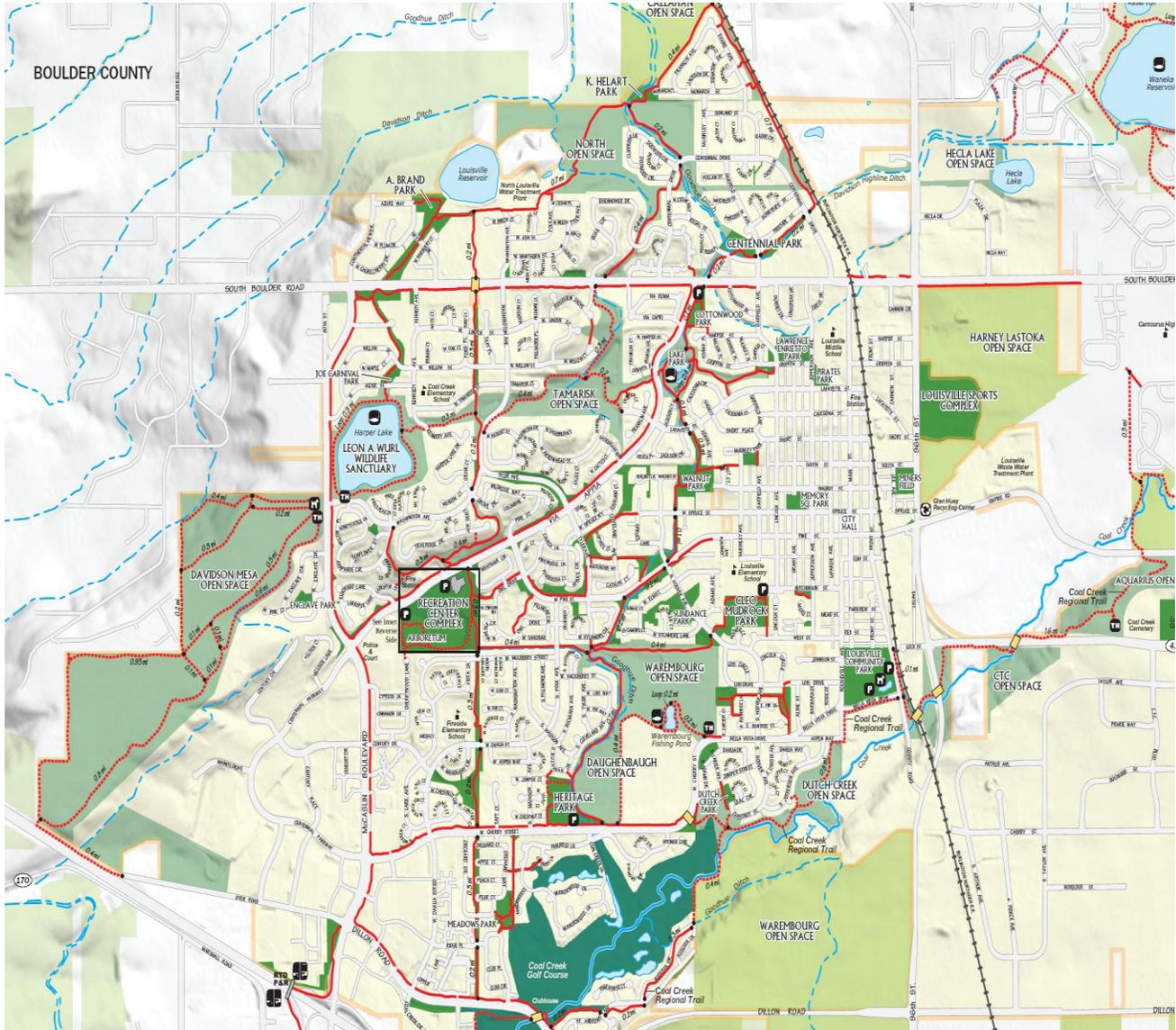
**THANKS FOR SHARING YOUR IDEAS WITH US!**

Please send completed forms to: City of Louisville Parks and Recreation Department, Attention Open Space, 749 Main Street, Louisville, CO 80027

Would you like to be contacted for upcoming trail maintenance volunteer opportunities?

Yes       No      If yes, please provide email:

\_\_\_\_\_



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