



Natural Area Steward Application

Name: _____

Address: _____

Home Phone: _____ Work Phone: _____

Email Address: _____

Employment Status: Full-time _____ Part-time _____ Retired _____ Self-employed _____

Emergency Contact: _____ Relationship: _____

Address: _____

Phone: _____

Area(s) of Availability in County: North _____ South _____ Central _____ West _____

Specific Natural Area(s) Preferred (if any): _____

Skills, Knowledge, Abilities: _____

Medical or Physical Limitations: _____

Special License(s), training (such as herbicide treatment or plant i.d.): _____

Special Notes: _____

Mail requests to:
PALM BEACH COUNTY
DEPARTMENT OF ENVIRONMENTAL RESOURCES MANAGEMENT
2300 NORTH JOG ROAD, 4TH FLOOR
WEST PALM BEACH, FL 33411-2743
(561) 233-2400

Fax requests to:
(561) 233-2414 ATTN: Ann Mathews

Email requests to:
amathews@co.palm-beach.fl.us