



#### What is the Ice Age Trail Community?

The Ice Age Trail Alliance's Trail Communities program is designed as a symbiotic relationship between the Ice Age Trail Alliance (IATA) and communities near the Trail which enhances awareness of the Ice Age National Scenic Trail (IANST) and improves the quality of life in communities throughout Wisconsin.

Initially, a Trail Community may expand to include broader regions. This program will formalize existing partnerships as well as establish a template that can be used to build partnerships in the future.



#### Criteria

A strong community application will include the following:

- An application committee comprised of elected officials, Chamber of Commerce (or related group), businesses and local Ice Age Trail Alliance chapter representatives.
- The community supports the Ice Age Trail Alliance and Ice Age Trail is evident.
- Language for the protection of the Ice Age Trail is included in local land use plans, planning tools, ordinances, and/or guidelines. Or demonstrate support to amend change or add to such plans.
- Involvement with the Ice Age Trail Alliance or Ice Age Trail with a local school including participation, or willingness to participate in, a Saunters program or service-learning event.
- Willingness to host a volunteer-based event such as a Mobile Skills Crew event, local chapter hike(s) or trailwide events.





Prior to filling out the following application, please contact the Ice Age Trail Alliance with questions or concerns, at 608.798.4453 or amy@iceagetrail.org.

Town	1)	Community information
Community Name  2) Contact information of community representative  Name Title Address City State Zip Phone E-mail  3) Contact information of lead volunteer  Name Title Address City State  State  Title State Title State Title State		Town
2) Contact information of community representative  Name		City
Name		Community Name
Name		
TitleAddress	2)	Contact information of community representative
Address City State Zip Phone E-mail  3) Contact information of lead volunteer  Name Title Address City State		Name
Address City State Zip Phone E-mail  3) Contact information of lead volunteer  Name Title Address City State		Title
City State Zip Phone E-mail  3) Contact information of lead volunteer  Name Title Address City State		
State		
ZipPhone		
Phone E-mail  3) Contact information of lead volunteer  Name  Title  Address  City  State		
State_		
3) Contact information of lead volunteer  Name  Title  Address  City  State		
Name Title Address City State		
TitleAddressCityState	3)	Contact information of lead volunteer
TitleAddressCityState		Name
AddressCityState		
City State		
State		
		Zip





5) Describe community event(s) or plans for event(s) that may include the Ice Age Trail Alliance and Ice Age Trail.

6) Are there existing land protection, management, or development projects that may benefit the Ice Age Trail? Please describe.



7) Attach any documents or links referencing language for the protection of the Ice Age Trail in local land use plans, planning tools, ordinances, and/or guidelines. Or, describe demonstrated support to amend change or add to such plans.

8) Describe why your community should be selected as an Ice Age Trail Community. What can the program do for your community? What can your community do for the Ice Age Trail?

9) What expectations does your community have of the Ice Age Trail Alliance?



10) Please check the hiker services available in your community. (Check all that apply)

Service	Not Available	On The Trail	1-5 Miles From The Trail	6-10 Miles From the Trail	Not Applicable
Lodging					
Camping					
Outfitter					
ATM's					
Hiker Friendly Restaurants					
Laundry					
Grocery					
Showers					
Pharmacy & Medical Services					
Library					
Internet Access					
Post Office					
Public Restrooms					
Discounts for Hikers					
Signage for IAT					
Kiosks about IAT					

11) Please describe any of the hiker services mentioned above.
You are also encouraged to send pictures if possible. (Please rate each)



#### 12) What is your community's state of action for each of the following?

Action	Not interested/sure, NA	Thinking about it	Definitely Getting Ready to Do This	Started Taking Actions	Already Doing This
Our community has strong partnerships with public land agencies.					
Volunteer leadership for the IATA in our community is committed.					
New IATA volunteers have stepped up recently.					
Our community offers community-led hikes on the IAT.					
We have made trail protection a priority.					
Our community regularly donates to the IATA.					
We partner with the IATA on programs.					
The IAT is included in our community brochures.					
Information about the IAT is included on our website.					
Community events have a focus on the IAT.					
Our community offers clear communication about the IAT to audiences through websites, signage, newsletters, etc.					

13) The IATA frequently hosts trainings, meetings and conferences. Please list any facilities in your community that can host a group of 40 people or more.



14) Please describe the condition of the access points for the IAT. List any planned improvements that may be needed.

15) Please list the schools actively engaged with using the Ice Age Trail as an educational resource. Include grades and number of youth.

16) Please check all of the following your community has:

- ☐ Visitor or Community Center
- Comprehensive plan and zoning ordinance (Please send in with application)
- Downtown beautification plan (Please send in with application)
- Strategic marketing plan (Please send in with application)

- Shuttle services from IAT to town and vice versa
- Public transportation to airports
- Car rental or taxi service
- Farmers Market



Thank you for your support of the Ice Age Trail Alliance! Please contact us at 608.798.4453 or amy@iceagetrail.org if you have any questions.

