



CITY OF BURLINGTON ADOPT-A-PARK

Organization/Group Name: _____

(Name on the Adopt-A -Park sign will appear as written on this line.)

Organization/Group Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

Contact Person: _____

Address (City, State, Zip): _____

Phone: _____ Fax: _____

E-mail address: _____

Best time to contact you?

_____ Morning _____ Afternoon

PARK INFORMATION

Park Requested for Adoption: _____

2nd Choice: _____ 3rd Choice: _____

Please supply us with a brief description of activities you, your group or organization would like to perform as part of the Adopt-A-ark Program

STATEMENT OF AGREEMENT:

As a representative of this family, group or organization, I have read and agree to follow the policies, regulations and safety guidelines of the City of Burlington's Adopt-A-Park Program. I agree to ensure all members of this group have signed a City of Burlington Volunteer Waiver and Hold Harmless agreement and all minors participating have a waiver signed by a parent/guardian. I agree to notify the Parks Department of any changes in the contact or contract information. I understand a City of Burlington representative will contact me to finalize an agreement. We have also provided a letter or support and understanding from the organization/group President/Director stating that the organization/group will be participating in the City of Burlington's Adopt-A-Park Program.

I understand the City of Burlington's Adopt-A-Park Coordinator will make the final determination as to whether a family, group or organization can participate and the final adoption location.

Signature _____ Date _____



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<i>FOR OFFICE USE ONLY</i>					
Date application received:		Processing Rep Initials:			
Assigned Location:		Adoption Dates: From:		To:	
New Signs:	Yes	No	Date ordered:	Date installed:	Date of 1 st project:
Special notes:					

City of Burlington – Department of Public Works
2200 S Pine St. / Burlington, WI 53105 / P: (262)-342-1181