

## "ADOPT-A-PARK" PROGRAM APPLICATION

Completed applications must be submitted to the Parks and Recreation\_Volunteer Program Manager at: 2121 N. Culpeper St., Arlington, VA, 22204, fax 703-228-4877 or via email: dprvolunteer@arlingtonva.us.

Name of Grou	up/Individua	nl:				
Project Leader:			(Please print) Date of Birth:			
Address:						
Telephone:	(Home) (Work)	(Mobile) E-mail				
Please check	what type o	f work area yo	ou wish to adopt and list	t the location:		
<ul><li>□ Playground</li><li>□ Park</li><li>□ Street Islan</li><li>□ Tree</li></ul>		☐ Field ☐ Trail ☐ Court ☐ Spot	☐ Stream ☐ Communit ☐ Planting Be	•	Location:	
Proposed Start	Date:	//	Propo	sed Ending Date:	/	_ /
Frequency of service days (i.e. Weel			y, Monthly, Quarterly):		_ Approx. Nur	mber of Participants:
Which of the	following be	est describes y	our group?			
	☐ Chu  be the propedetailed reg	rch osed project: ard the extent	☐ Service organization ☐ School youth group  of maintenance activited DPR Project Coordinates	$\square$ Other ( ies that are expe	•	posal must be agreed upon
representative of t Adopt-A-Park Prog	he group referer ram. I understai	nced above, I have ind this is agreemen	t is not complete until I have me	olicies, guidelines and et with a DPR Project Co	safety recommend cordinator to finaliz	d Agreements below. As a ations set forth by DPR regarding the ze and sign this Program Application t. I understand that as a Project
risk of serious injur	there are inherery, or even death	ent risks involved in , to me or the mem	,	nd agree that participa	ition in the Adopt-A	ty and the property of my group, and -Park Program is at my risk and the ge.
and all of its office	rs, agents and er	nployees from any	and all claims, losses, damages,	injuries, fines, penaltie	s and costs (includi	nnify the Board of Arlington County ng court costs and attorney's fees), e read this Program Application and
Signature: _					Date:	



## "ADOPT-A-PARK" PROGRAM CONDITIONS & AGREEMENTS

This page will be reviewed and completed during the on-site meeting.

This arrangement between	the Arlington County Department of Parks and Re	ecreation, hereinafter referred to as "DPR" and referred to as the "Adopter," entitles the Adopter to		
accept and perform volunte Areas and/or facilities listed	er service functions at	(insert address) for these		
The following conditions shal All safety tips are followed	Parent or legal guardian of any person less than 1 years of age must grant written permission for the child to participate in the Adopt-A-Park Program. Individuals or groups with members under 18 years of age must be supervised by adults (persons 18 years or older).			
Work may only be performed in the designated area.	All chemical applications, including lime, fertilizers, etc. must be applied by a certified, licensed applicator, approved by DPR.	No additions or changes to any County property may be made by the Adopter without a written request and written approval by DPR. All requests should be sent to the staff project coordinator.		
Any property that is damaged must be returned to its original condition.	Litterbags are to be placed next to trash receptacles or at designated locations. Litterbags will be removed by DPR.	Project leaders are responsible for: submitting all work projects to the DPR staff coordinator for approval; ordering materials, scheduling volunteer service days, returning unused materials, supplies and tools, and submitting completed Adopt-A-Park Program reports.		
The relationship between DPR and the Adopter and his or her group may be terminated by either party without cause, so long as thirty (30) days prior notice is given by the terminating party to the other party.	A sign may be installed by DPR if criteria are met and at least one service day has been completed by the Adopt-A-Park Program participating group, entity or person, in the sole discretion of DPR.			
Request for Sign: $\square$ No, no	ot desired or criteria not met $\ \square$ Yes, state	group name to be listed:		
Materials/Supplies Provided	by DPR: Materials/S	Supplies Provided by Adopter:		
Training Requirements:	☐ None ☐ Yes, details:			
FOR DPR OFFICE USE ONLY	Date Application received:	Date of On-Site Meeting:		
DPR Staff Coordinator:		Date:		
Volunteer Program Manage	r:	Date:		