



Exhibit C

Adopt-A-Park Program Volunteer Application

Individual or Organization Name _____ Date _____

Group contact person _____ Estimated group size _____

Address _____ City, State, Zip _____

Home Phone Number _____ Work Phone Number _____

Cell Number _____ Email _____

Emergency Contact _____

Relationship _____

Phone #1 _____ Phone #2 _____

How frequently do you or your group propose to participate in this program?

Weekly Monthly Quarterly Other _____

Program/Project

In order for the City of Toppenish to best match your interests and skills with available projects, please check opportunities of interest:

Adopt-A-Park Open Space Maintenance Special Interests or Talents _____

STATEMENT OF AGREEMENT

As a representative of this organization, I have read and agree to abide by the policies, regulations and safety recommendations as put forth by the City of Toppenish. I understand that this is an application for the City of Toppenish's park program and that a City of Toppenish representative will contact me to finalize an agreement. I understand that the City of Toppenish Public Works Department will make the final decision as to whether a group can participate, and the park assigned. I also agree to maintain, but not alter, remove or destroy the present landscaping or design of the park or open space which my/our project involves.

I/we understand that participation in the City of Toppenish's program is voluntary and that participants agree to assume the responsibility for an injury or damage to person or property.

Organization Contact Signature _____ Date _____

For Office Use Only
Assigned Park _____
Dates of Adoption: From _____ To _____
Organization (as it will appear on the sign): Line One _____
Line Two _____
New signs: Date Ordered _____ Date Installed _____