Adopt-a-Spot Application





Please complete this first half of this form and mail it to the address below or fax it to (925) 252-4851. Your request will be processed and a City staff person will contact you. If you have any questions or special needs, please call (925) 252-4936.

Name of Group/Organization: Primary Contact: Email Address: Fax #:	Today's Date:					
Primary Contact: Email Address: Phone #: Cell #: Fax #: Mailing Address: City: State: Zip Code: 1) Please check type of spot to be adopted:	Name of Group/Organization:					
Phone #: Cell #: Fax #: Mailing Address: City: State: Zip Code: 1) Please check type of spot to be adopted:	Primary Contact:				_	
Phone #: Cell #: Fax #: Mailing Address: City: State: Zip Code: 1) Please check type of spot to be adopted:	Fmail Address					
State: Zip Code:						
City: State: Zip Code: Park	Mailing Addross					
1) Please check type of spot to be adopted: Park					e:	
And what services will you provide:	☐ Park ☐ Creek ☐ Drain ☐ Trail ☐ Plaza ☐ Street (curb and sidewalk) ☐ Painting					
□ painting □ pruning shrubs □ other						
4) Generally, what day(s) of the week will you clean? Mon Tue Wed Thu Fri Sat Sun 5) List nearest address of your adopted spot: I agree and am authorized on behalf of myself / family / group / organization (circle one) to commit to and abide by the terms and conditions City's Adopt-a-Spot Volunteer Program, its Guidelines, its Safety Guidelines, Code of Conduct and Recordkeeping. I agree to return all tools, extra trash bags, and other materials given to me to complete this project after the clean-up event if this is a onetime project or after I decide to leave the Adopt-a-Spot Volunteer Program if this is an ongoing project. VOLUNTEER'S Signature VOLUNTEER'S Name (please print) For Staff Use Only SITE ASSESSMENT Date of Assessment: Notes/Safety Concerns:						
Mon	3) Approximately how many volunteers will be cleaning the area?					
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Notes/Safety Concerns:	For Staff Use Only SITE ASSESSI	MENT	VOLUNTEER'	S Name (please prir	nt)	
NITE ADDITOVED/LIEDIED DV.	•					
Date:						