## Adopt-A-Park REGISTRATION FORM

Request (check one):	_	e:	
Group Name:			
Park Site:			
Estimated Total Number of Volunte			
Name to be used for reco	ognition (two line maximun	n, 15 characters/spaces per li	ne)
Street	City	State Zip Code	
Primary Contact (Name)	Telephone	Email Address	
Alternate Contact (Name)	Telephone	Email Address	
Please check the box that best describes [] Business [] Nonprofit [] Community Group [] School/Classroom [] Family [] Neighborhood Association [] Other (Please specify):			
Section 2 – Park Selection			
Name of park or trail segment you wo sites).	uld like to adopt (please refe	r to the list of available adoption	
First Choice: Please select a park or trail:			
Second Choice: Please select a park or trail:			
Third Choice:			

## Section 3 – Adoption Information

Adopt-A-Park Primary Contact Signature Date	
Adopt-A-Park Primary Contact <b>Print Name</b>	
Please direct any questions about this form or any of its contents to Laura Hatfield, Superintend Community Engagement, 859-288-2921. Completed applications can be e-mailed to Laura Hatf <a href="mailto:lhatfield@lexingtonky.gov">lhatfield@lexingtonky.gov</a> .	
I have read and understand my/my group's Adopt-A-Park commitment as stated in the Lexington Recreation Adopt a Park Handbook.	n Parks and
This form is structured to gather the necessary information from groups or individuals interested Adopt-a-Park program offered by Lexington Parks & Recreation. Following the evaluation of the Interest application, LFUCG Parks and Recreation has three options: Approval of the proposal a negotiations; Request additional information from the proposers; or Reject the proposal. In addit and Recreation application approval, all projects will be required to comply with all applicable located laws and regulations.	Partnership and enter ion to Parks
By signing below, I acknowledge As a volunteer, I agree to help maintain but not alter the present landscaping or design of a park follow all Lexington Parks and Recreation volunteer and Adopt-A-park policies and procedures. that, if granted, Lexington Parks & Recreation may terminate this permit at any time without cau am volunteering my services and may be asked to discontinue such without prior notice or reaso	I understand se, and that I
[ ] One-time Access to Play installation [ ] Weekly [ ] Monthly [ ] Quarterly	
Estimated Frequency:	
Estimated Number of Volunteers:	
Desired Start Date: (mm/dd/yyyy)	
Please provide a brief project description:	
[] Binocular Post [] Programming [] Park Beautification	inger Hunt
[ ] Park Cleanup/Maintenance [ ] Access to Play – Please select the access to play feature you wish to install (select all tha [ ] Communication Board [ ] Interactive Ground Games [ ] Sensory Activity Path [ ] Scave	
Please specify which adoption type you would prefer by checking the corresponding box below:	

## For Administrative Use Only:

Application	Status [	Approved	[] Denied	Date:	<del></del>					
Reason for D	enial:				Initials:	_				
Start Assigned Facility:		Sign Installed Date/Ir	itial: Expiration Date:		_					
Supervisors, enter the year and total monthly service hours in the squares below:										
January, 20	Feb, 20	March, 20	April, 20	May, 20	June, 20	_				
July, 20	August, 20	Sept., 20	October, 20	Nov, 20	Dec, 20	_				