

Adopt-A-Park Application

Please complete and return to City of Marysville, Community & Economic Development Department
cdd@marysville.ca.us
526 C St. - Marysville, CA 95901

Contact Information

Organization Name: _____
Contact Person: _____ Contact Person's Title: _____
Phone Number: _____ Alternate Phone Number: _____
Mailing Address _____
Email Address: _____

Park Preference

Preferred Adoption Location: _____
Second Choice Location: _____
Third Choice Location: _____

Adoption Method

Please specify which level of adoption you would prefer by checking the box(es) below:

☐ Custodial ☐ Beautification ☐ Donation

Project Description: _____
Work Schedule: _____ Total Monthly Hours: _____
Type of Donation: _____

Term of Agreement

I certify that I understand the Adopt-A-Park guidelines and that I possess the authority to execute this agreement on behalf of the organization. I understand this is an application for the Adopt-A-Park Program and the Community Services Department will contact me to finalize the agreement.

Print Name _____ Title _____
Signature _____ Date _____

Official Use Only

Date Received: _____ Approved/Denied (Circle) Adoption Terms: _____ Start Date _____
Adoptee Signature _____ City Approval _____
Reason for Denial: _____
Sign Installed: _____