



Adopt-A- Park

City of Morganton Parks and Recreation

Adoption Proposal

Date: _____

Adopt-A-Park Participant or Group: _____

Group Captain or Contact Person: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Work Phone: _____ Home Phone: _____ E-mail: _____

Park Interested in Adopting: _____ Specific Area (if applicable) _____

Scope of Work tasks interested in) _____

Work Schedule: Full Time: () Part Time: () Un-Employed: () Total Work Hrs: _____

TERMS AND CONDITIONS

1) Term:

- a) Subject to the City of Morganton right to terminate, this agreement shall be in full affect for the duration of one year from the start of this date: _____

2) Conditions:

- a) The participant(s) shall develop and follow a regular schedule of maintenance of the property as agreed upon by the Department of Parks and Recreation and report any park hazards to City staff.
- b) The contact person shall report all hours volunteered to the Adopt-A-Park Coordinator.
- c) Each individual participant must sign the City of Morganton standard volunteer service agreement.
- d) The City of Morganton may photograph or videotape the events or activity in which the participant is participating for purpose of promoting the City of Morganton and its services/programs, with the following understanding that no compensation of any kind will be paid to the participant.

3) Access:

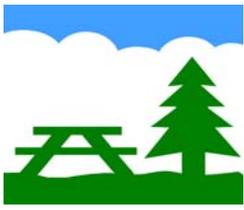
- a) Volunteers are permitted access to City property for the purpose of carrying out the terms of this Agreement.

SIGNATURE OF PARTICIPANT

SIGNATURE OF PARKS AND RECREATION STAFF

Office Use Only: Approved () Denied () Date: _____ Training Date: _____ Contract Period: _____

Explanation For Denial: _____



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City of Morganton Parks and Recreation

Volunteer Service Waiver

Date: _____

I, _____, agree to volunteer my services to the *Morganton Parks and Recreation Department*.

I understand my schedule will be as stated in the Adopt-A-Park Proposal and Agreement. I understand that any changes to my schedule are subject to the approval, in advance, by the Program Coordinator.

I acknowledge that there is no salary or other compensation, or prizes of any kind to be provided by the City for my services as a volunteer. Rewards or prizes for volunteer service to the City may be offered by other persons; however, the City is not responsible for the payment of any such reward or prize to me.

The City's Worker's Compensation Insurance will not cover you in the event of illness, injury or accident. Further, you agree to release the City from any liability whatsoever arising out of or in any way resulting from accidents, injuries or other fortuitous events or occurrences causing Injury to the employee except for intentional misconduct by the City or gross negligence on the part of the City.

I also acknowledge and agree that my services are provided for the convenience of the City and may be terminated for any reason or for no reason and at any time by the City without notice.

Group Name

T-Shirt Size

Volunteer's Name (Please Print)

Date of Birth

Mailing Address

City

State

Zip

Phone (day)

Phone (evening)

E-mail Address

Emergency Contact / Relationship

Emergency Contact Phone Numbers

Volunteer's Signature

Signature of Adopt-A-Park Staff

How did you hear about the Adopt-A-Park Program: _____

Adopt-A-Park City of Morganton Parks and Recreation

Volunteer Activities and Hours Sheet



Volunteer Signature: _____

Week Ending: _____

Park Superintendent Approval: _____

	Date	Time In	Time Out	Hours	Activities
Sunday					
Monday					
Tuesday					
Wednesday					
Thursday					
Friday					
Saturday					

Weekly Hours	<input type="text"/>
Monthly Hours	<input type="text"/>
Total Hours	<input type="text"/>