

Adopt-A-Street Agreement



Full Organization/Group Name: _____
Group Coordinator/Contact Name: _____
Mailing Address: _____
City: _____ State: _____ Zip: _____
Phone Daytime: _____ Phone Evening: _____
Email Address: _____

Brief Summary of Organization:

Why do you choose to participate in the Adopt-A-Street program? Is there a reason you chose the street you are adopting?

We, _____ are committed to picking up trash and litter along city street _____ from _____ to _____ . We agree to pick up litter a minimum of **THREE** times each year (as per attached guidelines).

We have read and understand all provisions and policies of the City of Branson Adopt-A-Street program and will abide by them and any other terms and conditions as required by the City of Branson for participation in this volunteer program.

_____ X _____
Group Coordinator/Contact Signature/Date

_____ X _____
City of Branson Representative Signature/Date

Name to appear on sign

Limited to the group/individual name only. No logos or slogans. Allowed exceptions are "EMPLOYEES/FRIENDS OF" or "IN MEMORY OF".

Up to 15 characters per line, 2 lines maximum, space counts as 1 character. Sign created after first pickup.

Email publicworks@bransonmo.gov or call 417-337-8559 for more information regarding the Adopt-A-Street program.

Return completed form to:
City of Branson, Adopt-A-Street Program
110 W. Maddux St., Ste. 310
Branson, MO 65616