



City of Watsonville
Parks and Community Services
**ADOPT-A-PARK PROGRAM
APPLICATION**

Name of Group/Organization: _____

Circle one:

Are you a: Business Non-Profit Group School Other:

Primary Contact Information:

Representative Name: _____

Mailing Address: _____

Phone Number: _____ Email: _____

Park Requested: _____

Commitment Timeframe: From (Month/Year) _____ To (Month/Year) _____

Estimated Number of Volunteers: # of Adults _____ # of Minors _____

As the representative of this organization, I have read and agreed to the guidelines of the City of Watsonville Parks and Community Services Adopt-A-Park Program handbook. **It is my responsibility to have all participants of my organization involved in the Adopt-A-Park Program complete and sign the volunteer application as well as understand the safety guidelines within the handbook.** I understand my group will be removed from the program if all guidelines are not followed.

Signature: _____ Date: _____

The City of Watsonville Parks and Community Services Department thanks you for completing the Adopt-A-Park Program Application.

Once form is completed, please submit for approval.

Mail to: City of Watsonville
Parks & Community Services
231 Union Street
Watsonville, CA 95076

Email: sara.jewell@watsonville.gov
Fax: (831) 763-4078