



Adopt-a-Spot Application

Yes! I want to adopt a spot in the City of Arlington!

Date: _____

Last Name: _____ First Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Alternate Number: _____

Email: _____

Group Affiliation, if any _____

If you are a member of a group, are you the group's designated spokesperson? () Yes () No

Name to be placed on the Adopt-a-Spot sign: _____

Note: You may purchase an Adopt-a-Spot sign upon request. Characters may vary on adoption sign. Sign installation will occur after the agreement is assigned. Allow 6-8 weeks for sign installation.

I would like to adopt the following area (s) if available. *(Please be as specific as possible and INCLUDE 3-5 photographs of the areas – specifically views of ALL boundaries of area and frontal view)*

 Signature

 Date

For Office Use Only:

Date Application Accepted: _____ Volunteer ID#: _____

Area Assigned: _____

Liability Waiver Attached () Yes () No

Application Accepted/Processed By: _____

Return application to:
 City of Arlington
 Parks and Recreation Office
 ATTN: Adopt-a-Spot Program
 717 W. Main Street
 Arlington, Texas 76013



