



**CITY OF REDDING  
ADOPT-A-PARK PROGRAM  
APPLICATION TO PARTICIPATE**



**APPLICANT INFORMATION**

INDIVIDUAL / ORGANIZATION / BUSINESS NAME

PRIMARY CONTACT / ADOPT-A-PARK CAPTAIN

TITLE

ADDRESS

CITY

STATE

ZIP CODE

PHONE NUMBER

FAX NUMBER

E-MAIL ADDRESS

ALTERNATE CONTACT (Required)

ALTERNATE CONTACT'S PHONE NUMBER

NUMBER OF VOLUNTEERS IN GROUP

NUMBER OF VOLUNTEERS UNDER AGE 18

ADOPTION SITE NAME AND LOCATION

ALTERNATE ADOPTION SITE NAME AND LOCATION (If first is unavailable)

SECOND ALTERNATE ADOPTION SITE NAME AND LOCATION (If second is unavailable)

SIGNATURE (The undersigned agrees that all work will be done in accordance with the City of Redding's Adopt-A-Park Program rules and regulations and will be subject to inspection and approval. The Adopt-A-Park Program and its courtesy signs are not a forum for advertisement or public discourse.)

SIGNATURE OF PRIMARY CONTACT/ADOPT-A-PARK CAPTAIN

DATE

**THIS SECTION TO BE COMPLETED BY ADOPT-A-PARK OFFICIAL**

ADOPTION SITE / PARK

ADOPTION SITE APPROVAL

DATE