



Adopt-a-Street Application

Name of Organization _____

Address: _____

Responsible Party (Chair, President): _____

Address: _____

Home Phone: _____ Work Phone: _____

Section of street (block) you are interested in adopting. Give three (3) choices and please be very specific:

1. _____
2. _____
3. _____

If approved for this program, I am aware of our responsibility to the participants, and the requirement to have all volunteers sign (and return to our office) a Volunteer Waiver & Acknowledgment Form.

Print Name: _____ Signature: _____

Title: _____ Date: _____

Any questions? Please call Mansfield Litter Prevention & Recycling at 419.755.9699 or e-mail at: manslprp@ci.mansfield.oh.us.

Please return form to:
Mansfield Litter Prevention & Recycling
30 North Diamond Street
Mansfield, Ohio 44902

**Thank you for your interest in
'Keep'n Our Streets, Look'n Neat!'**

Office Use Only:

Application Sent: _____

Application Received: _____

Application Approval Date: _____

Name of Organization: _____

Stretch of Street Adopted: _____

Adoption Commencement Date: _____

Termination Date: _____