



**PRIDE IN OUR PARKS PROGRAM
PROPOSAL AND AGREEMENT**

Group Name (or Participant): _____

Contact Information for Responsible Individual (*minimum 18 years of age or older*):

Name: _____

Address: _____

City: _____ State: _____ Zip Code : _____

Phone(d): _____ (e): _____ e-mail: _____

*** Please provide a separate list of all participants names, ages and contact information.**

Program Proposal

Park or Area to be Adopted: _____

Scope of Work: _____

Terms and Conditions

1. This agreement shall be in effect for two (2) years from the date of City Council approval unless terminated by the City.
2. The participant(s) shall develop and follow an activity program of the property in accordance with the Pride in Our Parks policy of the City of Otsego.
3. The participant shall provide a monthly report all program activities to the Parks and Recreation Commission.
4. Each individual participating in the Pride in our Parks program must sign a liability waiver in the form provided by the City of Otsego.
5. Participants shall follow all park and trail regulations established by the City Code and adhere to the Pride in Our Parks policy.

Participant: _____

Date: _____