

INITIAL INFORMATION TO BE PROVIDED TO KUCB

Organization Name: _____

Adopt-A-Road Coordinator's Name: _____

Address: _____

(City) (State) (Zip Code)

Phone: _____

E-Mail address: _____

Road to be adopted by the organization: _____

Beginning Point/Intersection: _____

Ending Point/Intersection: _____

Contract Period (2-year minimum): _____

Name to appear on Adoption Sign: _____

(maximum 44 characters including spaces)

Adopt-A-Road Statement of Understanding

Union County and the "Keep Union County Beautiful" (KUCB) Board are grateful to have you become a part of the Adopt-A-Road program. Your participation in this program will help other Union Countians as well as KUCB create a cleaner environment in Union County.

_____ (hereinafter called "Organization" has expressed a desire to perform litter pick up on _____ Road/Drive/Street, beginning at _____ and ending at _____.

In consideration of the mutual benefits to be derived, the parties agree to the following:

The Keep Union County Beautiful Board (hereinafter called "KUCB") will provide to the Organization:

1. Safety vests and gloves
2. Trash bags
3. Placement of Adopt-A-Road signs bearing the name of the Organization
4. Recognition via articles in local newspapers
5. Certificates of appreciation at the end of the contract period

The Organization agrees that it shall do the following:

1. Conduct safety briefings for the litter volunteers before each organized cleanup
2. Pick up at least four times a year, once each quarter
3. Wear safety vests (those provided by KUCB, or equal)
4. Adopt at least a one-mile section of road for a two-year period
5. Have all participants sign the Release (see next page) NOTE: participants under 18 must have parents or guardians sign the Release.
6. Fill out and return to KUCB a Volunteer Report after each pickup. "Before" and "After" photos of the area will also be appreciated.

Name of Organization

X _____
KUCB Coordinator/Director

X _____
Authorized Signature

X _____
Union County Mayor

Keep Union County Beautiful

RELEASE

My signature below indicates that I acknowledge the fact that working on the roadways and along their rights of way can be a hazardous activity, and that I accept the risks associated with this work. Furthermore, I do hereby release and agree to hold harmless Union County, Tennessee, and the Keep Union County Beautiful Board from any and all liability for injury to any person, damage to my property, or death, whether or not such liability is based on negligence or otherwise.

This release continues and is effective until such time as revoked by me in writing and delivered to the Keep Union County Beautiful Board.

DATE: _____

NAME	SIGNATURE	ADDRESS
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Return to:


Tammie Carter, Director
tammie.carter@cot.tn.gov
Keep Union County Beautiful
901 Main Street
Suite 100
Maynardville, TN 37807

Phone: (865) 992-3061 or
865-992-3211

Facebook page: Keep Union County Beautiful



VOLUNTEER MONTHLY REPORT

NAME	DATE	# OF BAGS COLLECTED, HOW MANY MILES CLEANED, WHICH ROADS	TIME IN & TIME OUT
GRAND TOTAL			

Tammie Carter, Director
 Keep Union County Beautiful
 901 Main Street
 Maynardville, TN 37807