CITY OF TEMPE ADOPT-AN-ALLEY VOLUNTEER AGREEMENT

__________________________________________________
Organization Name

__________________________________________________
Responsible Party* Name

____________________________________
Address

____________________________________
Phone

____________________________________
City, State

____________________________________
Zip Code

*The Responsible Party should be the person lawfully authorized to act on behalf of the organization/volunteer group and designated by the organization/volunteer group as the only contact for the City on all matters related to the agreement.

Alleys interested in adopting: (Individuals, private corporations and non-profit organizations residing adjacent to the alley being adopted are eligible to volunteer.)

1._____________________________________________________________

2._____________________________________________________________

3._____________________________________________________________

Applicant agrees to all terms and conditions as outlined in the “Adopt-An-Alley Policies, Rules and Procedures” document. I have read this agreement and understand the terms.

__________________________________________________________
Printed Volunteer Cleanup Coordinator Name

__________________________________________________________
Date

__________________________________________________________
Signature

__________________________________________________________
Phone Number

__________________________________________________________
E-Mail Address