



**City of Terrell  
Adopt-A-Neighborhood  
Application**

Date of Application: \_\_\_\_/\_\_\_\_/\_\_\_\_

Group/Applicant's Name: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone No. (daytime): \_\_\_\_\_ (evening): \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Neighborhood Adopted: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Number of Participants: \_\_\_\_\_

Please list at least four (4) possible clean up dates:

\_\_\_\_\_

**Return this form to:**

**City of Terrell Public Works Dept. ~ 201 E. Nash St. / P.O. Box 310 ~ Terrell, Texas 75160  
Phone: (972) 551-6609 / Fax: (972) 551-6620**



**City of Terrell  
Adopt-A-Neighborhood Program  
Group Release Form**

By my signature on this Release, I understand and am fully aware that the Adopt-A-Neighborhood Program involves standing and walking on streets individually or within a group for the purpose of picking up litter together with the potential hazards connected with such activities.

As a part of my voluntary participation in the Adopt-A-Neighborhood Program, I agree to assume all responsibility on behalf of myself and/or my children and to hold the City of Terrell, together with its elected officials, employees, agents and assigns harmless from any and all claims that may arise from any accident, injury, damage, or other loss of life or property as a result of my voluntary participation in this program.

I further acknowledge that I have reviewed and understand the Adopt-A-Neighborhood Program safety materials prior to my participation in the program. Further, I have reviewed these materials with my children if they are participating. By my signature on the Release, I certify that these materials meet all necessary criteria.

Finally, I further understand and agree that if my children participate in this program, they must be accompanied by a parent, legal guardian or other responsible adult at all times during such participation.

Dated: \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
**Volunteer/Participant**

\_\_\_\_\_  
**Address**

Printed names of children under the age of 18 years of age:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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