



What Is It?

The Adopt an Open Space, Park, Golf or Trail Program provides enhanced maintenance for Louisville's green spaces. The volunteer program encourages businesses, organizations, clubs, churches, schools, and individuals to volunteer their time and talents to help maintain, remove litter from and improve the City's Open Space, Parks, Golf Course and Trails.

Why Is The Adopt Program So Important?

Limited budgets prohibit optimal landscaping and maintenance in some areas; however, increased usage and the need for maintenance continues to grow and the City is committed to keeping public areas beautiful and well maintained for all to enjoy.

How Does The Program Work?

An individual or group may adopt an available Open Space, Park, area of the Golf Course or Trail of their choice. Deadline to Adopt a Property is April 1st of each year. The Parks and Recreation Department is available to assist you in selecting an adoption location. Complete the Adoption Application Form and Volunteer Application to commit to at least 4 work days or 10 hours during the adoption year (more days are desirable) performing tasks throughout the year such as removing litter, pulling weeds, painting, mulching, at the golf course divot repair, cart path maintenance, cart washing and cleaning, flower planting, clean-up of waterways and invasive plant removal. Record your work days, hours worked and type of work completed on an Adopt Work Form to submit to Parks and Recreation staff. The Parks and Recreation Department will provide trash bags, gloves, and mulch (when needed). Staff will also provide instructions and task recommendations as needed. Each Open Space, Park, Golf, or Trail adoption expires December 31st of each year regardless of when the adoption started.

Who Is Eligible?

The entire community of Louisville is eligible to participate. Businesses, schools, churches, fraternal organizations, clubs, associations and individuals have adopted Open Spaces, Parks, and Trails in the past. Coal Creek Golf Course is new to this program as of 2016.

How Do We Recognize Our Volunteers?

With your one-year commitment and completing 10 hours of volunteer work, a sign will be placed at the adopted location bearing the name of the group or individual that has adopted the Open Space, Park, Golf, or Trail.

How Do You Get Started?

Complete the Adoption Application and the Volunteer Application and mail or deliver to: City of Louisville Parks and Recreation, 717 Main Street, Louisville, CO 80027. Once the City has processed your Volunteer Application, a representative from the Parks and Recreation Department will contact you to discuss the adoption process.

ADOPT AN OPEN SPACE, PARK, GOLF OR TRAIL

PROGRAM POLICIES

An individual or group may apply to adopt an Open Space, Park, Golf or Trail in the City of Louisville. A minimum one-year commitment is required. All adoptions will terminate on December 31 of each year regardless of when the adoption started. When an adoption terminates, if acceptable to both parties, the adopting organization or individual may renew the adoption for an additional year. An adoption cannot be assigned to another group or person.

Requests to adopt specific Open Space, Park, Golf or Trail are processed on a first-come, first-serve basis. Deadline to Adopt a Property is April 1st of each year. If there are simultaneous requests for the same location, a lottery will be held to select which organization or individual will adopt that location. The Parks and Recreation Director or his/her designee will make the final determination as to whether a group can participate and will approve final adoption locations.

Each volunteer group leader / contact person is required to complete and sign a Program Application before participating in the Adopt Program. Volunteer Applications are also required every two years for all individuals who volunteer more than one day per year.

The adopting organization or individual must agree to work at least 4 days or 10 hours during the year at their adopt location performing tasks such as removing litter, controlling weeds, repairing or painting fences or handrails, mulching, golf course divot repair, cart path maintenance, and cart washing and cleaning. More work days, bi-monthly or monthly are highly recommended. The adopting organization or individual must fill out an Adopt Work Form for each day worked at the adoption location, tracking and recording the time spent, the names of all participants present, and the type of work completed, and submit to Parks and Recreation staff.

Participation in the Adopt Program can be hazardous. All participants must sign the Volunteer Waiver for Participating Adults form before each work day. When children under the age of eighteen participate, a parent or guardian of each minor must sign a Volunteer Waiver Form for Participating Minors. There must be one adult present for every five minors participating. The volunteer group leader / contact person shall have emergency contact information accessible at the site.

City of Louisville will provide the following for adopting organizations or individuals:

- Signage at selected location identifying the adopting organization or individual
- Trash bags and Gloves (Work gloves must be returned within 48 hours after work day)
- Mulch (for specific projects)
- Adopt Work Forms
- Additional safety information

The volunteer group leader / contact person from the adopting organization must contact the Parks and Recreation Department between the hours of 8:00 a.m. and 5:00 p.m., Monday through Friday, at least 48 hours prior to the work day to make arrangements to pick-up needed items and schedule a pick-up date for bagged debris/trash collected from adoption locations. Pick-up of items, excepting Golf, will be at the City Services Facility at 739 S. 104th Street in Louisville. Golf pick-up will be at Coal Creek Golf Course Pro Shop, 585 W. Dillon Road, Louisville. If the volunteers have agreed to provide support for more complex maintenance activities such as: construction, fence/gate work, painting, and/or mulching, the volunteer group leader / contact person must contact the Parks and Recreation Department at least two weeks before the scheduled work day.

All participants are required to read the Safety Recommendations and conduct themselves in a safe manner at all times while participating in the Adopt Program. In addition, each participant is required to wear gloves while working in your adoption location.

SAFETY RECOMMENDATIONS

SAFETY DOs:

DO make sure that all participants are familiar with these safety recommendations.

DO assign one volunteer as a safety coordinator who oversees other volunteers to ensure that work is conducted in a safe manner, paying special attention to participating minors.

DO wear light or bright-colored clothing, gloves, and hard-soled, protective shoes which are appropriate for the weather and work associated with the specific Open Space, Park, Golf or Trail adoption.

DO take breaks on a regular basis.

DO work only when weather is fair and in the daylight.

DO bring a water bottle and wear sunscreen and sunglasses.

DO be aware of your physical condition and refrain from doing any activities beyond your capabilities.

DO watch and take precautions for:

- Snakes, other animals and insects
- Noxious weeds
- Glass, barbed wire, pipes and debris with sharp or rusted edges
- Unexpected holes or ditches

DO be aware of traffic on adjacent roads and driveways.

SAFETY DON'Ts:

DON'T step into a roadway for any reason. Don't pick up litter or debris on a roadway surface or close to the edge of the road.

DON'T park vehicles in unauthorized areas.

DON'T do anything to distract passing drivers.

DON'T bring pets with you during work days.

DON'T leave children or pets in the car while participating in the program.

DON'T pickup any materials which may be hazardous to your health (e.g. chemical, firearms, hypodermic needles, etc.). Please notify the City if hazardous conditions exist (911 for emergencies or 441-4444 for non-emergencies).

*****These recommendations are not all inclusive. Take all precautions necessary to avoid accidents.*****



New Application _____

Renewal Application _____

ORGANIZATION OR INDIVIDUAL NAME _____
(As it is to appear on sign)

(up to 20 characters per line – one or two lines)

GROUP LEADER / CONTACT PERSON _____

TITLE OR POSITION _____

EMAIL ADDRESS _____

PHONE NUMBER (Day) _____

MAILING ADDRESS _____

ESTIMATED NUMBER OF PARTICIPANTS _____

PREFERRED ADOPT LOCATION _____

TENTATIVE STARTING DATE _____

ANTICIPATED NUMBER OF WORK DAYS _____

I understand that in addition to this form, I must also complete and submit the Volunteer Application.

I have read and agree to abide by the policies, regulations and safety recommendations as put forth by the City of Louisville in regard to the Adopt an Open Space, Park, Golf or Trail Program. I understand that once the City has processed the Volunteer Application, a Parks and Recreation Department representative will contact me to discuss the adoption process. In addition, I understand that the Director of Parks and Recreation or his/her designee will make the final determination as to whether a group can participate and will approve the final adopt location.

SIGNATURE _____ DATE _____

VOLUNTEER WAIVER **FOR PARTICIPATING MINORS**

I, the undersigned, hereby represent that my child(ren) has/have volunteered to participate in the Adopt an Open Space, Park, Golf or Trail Program ("Program") during the year _____. I have read the safety recommendations associated with the Program and have discussed them with my child(ren).

I acknowledge and am aware that participation in this Program has inherent risks and hazards, particularly due to the presence of traffic on roadways near adopted Open Space, Parks, Golf and Trails, and the potential for encountering snakes, insects, and other animals, noxious weeds, hazardous debris, and unexpected holes and ditches. I understand that it is my child(ren)'s responsibility to be aware of his or her physical condition and refrain from doing any physical activities beyond his or her capabilities.

I agree to defend, indemnify and hold harmless the City of Louisville, and its officers and employees, from and against any and all liability, claims, demands and expenses, including court costs and reasonable attorney fees, on account of any property damage, bodily injury, sickness, damage, or other loss of any kind whatsoever, which arise out of or are in any manner connected with the work to be performed under the Adopt an Open Space, Park, Golf or Trail Program, if such injury, loss, or damage is caused in whole or in part by, or is claimed to be caused in whole or in part by, the act, omission, or other fault of my child(ren) participating in the Program.

I hereby further waive, release and discharge the City, its officers and employees from any and all claims, demands and actions for any injury, loss or damage arising out of or related to my child(ren)'s participation in the Program, whether or not caused by the act, omission, negligence or other fault of the City, its officers or its employees, or by any other cause, excepting only willful and wanton conduct of the City's officers or employees.

By signing below, I acknowledge that I am the parent of the below-named child(ren) as the term "parent" is defined in C.R.S. Section 13-22-107(2)(b), and in addition to execution of the foregoing on behalf of the participant, I hereby waive and release any prospective claim of the child against the City, its officers and its employees for negligence, to the extent provided by C.R.S. Section 13-22-107(3), in connection with the above-described Program.

THIS FORM MUST BE TURNED INTO THE CITY CONTACT PERSON AT LEAST 3 DAYS PRIOR TO STARTING THE FIRST CLEAN-UP. ADDITIONAL SHEETS MUST ALSO BE TURNED IN IF VOLUNTEERS ARE ADDED AFTER FIRST CLEAN-UP.

1.) NAME OF CHILD:

2.) NAME OF CHILD:

CONTACT IN CASE OF EMERGENCY: _____

EMERGENCY CONTACT PHONE NUMBER: _____

PARENT/GUARDIAN NAME: _____

ADDRESS: _____

PHONE NUMBER: _____

PARENT/GUARDIAN SIGNATURE: _____ DATE: _____

VOLUNTEER WAIVER **FOR PARTICIPATING ADULTS**

I, the undersigned, hereby represent that I have volunteered to participate in the Adopt an Open Space, Park, Golf or Trail Program ("Program") during the year _____. I have read the safety recommendations associated with the Program.

I acknowledge and am aware that participation in this Program has inherent risks and hazards, particularly due to the presence of traffic on roadways near adopted Open Space, Park, Golf or Trail, and the potential for encountering snakes, insects, and other animals, noxious weeds, hazardous debris, and unexpected holes and ditches. I understand that it is my responsibility to be aware of my physical condition and will refrain from doing any physical activities beyond my capabilities.

I agree to defend, indemnify and hold harmless the City of Louisville, and its officers and employees, from and against any and all liability, claims, demands and expenses, including court costs and reasonable attorney fees, on account of any property damage, bodily injury, sickness, damage, or other loss of any kind whatsoever, which arise out of or are in any manner connected with the work to be performed under the Adopt an Open Space, Park, Golf or Trail Program, if such injury, loss, or damage is cause in whole or in part by, or is claimed to be caused in whole or in part by, the act, omission, or other fault of my participation in the Program.

I hereby further waive, release and discharge the City, its officers and employees from any and all claims, demands and actions for any injury, loss or damage arising out of or related to my participation in the Program, whether or not caused by the act, omission, negligence or other fault of the City, its officers or its employees, or by any other cause, excepting only willful and wanton conduct of the City's officers or employees.

THIS FORM MUST BE TURNED INTO THE CITY CONTACT PERSON AT LEAST 3 DAYS PRIOR TO STARTING THE FIRST CLEAN-UP. ADDITIONAL SHEETS MUST ALSO BE TURNED IN IF VOLUNTEERS ARE ADDED AFTER FIRST CLEAN-UP.

1.) NAME OF PARTICIPANT: _____ PHONE #: _____

PARTICIPANT SIGNATURE: _____ DATE: _____

EMERGENCY CONTACT: _____ CONTACT PHONE #: _____

2.) NAME OF PARTICIPANT: _____ PHONE #: _____

PARTICIPANT SIGNATURE: _____ DATE: _____

EMERGENCY CONTACT: _____ CONTACT PHONE #: _____

3.) NAME OF PARTICIPANT: _____ PHONE #: _____

PARTICIPANT SIGNATURE: _____ DATE: _____

EMERGENCY CONTACT: _____ CONTACT PHONE #: _____



**-WORK FORM-
FOR AN
OPEN SPACE OR OPEN SPACE
TRAIL ADOPTION**

Adopt Site:		Date of Work:
Group Name (if applicable):		
Start Time:	End Time:	
Participant Names		Hours Worked
1)		
2)		
3)		
4)		
5)		
6)		
7)		
8)		
TOTAL # Participants:	TOTAL Hours Worked:	
TOTAL Group Time Worked (total # participants X total hours worked):		

Work Completed (e.g. trash pick-up, weed removal, trail repair, painting, fence repair, pruning, mulching, etc):

Notes for Staff - additional repairs or maintenance needed at the site (vandalism, trail conditions, parking lots, etc):

A work form should be completed after each visit to your site and emailed to catherinej@louisvilleco.gov or mailed to:

City of Louisville
Attn: Catherine Jepson
739 S. 104th Street
Louisville, CO 80027



**-WORK FORM-
FOR A
PARK OR GENERAL TRAIL
ADOPTION**

Adopt Site:		Date of Work:
Group Name (if applicable):		
Start Time:	End Time:	
Participant Names		Hours Worked
1)		
2)		
3)		
4)		
5)		
6)		
7)		
8)		
TOTAL # Participants:	TOTAL Hours Worked:	
TOTAL Group Time Worked (total # participants X total hours worked):		

Work Completed (e.g. trash pick-up, weed removal, trail repair, painting, fence repair, pruning, mulching, etc):

Notes for Staff - additional repairs or maintenance needed at the site (vandalism, trail conditions, parking lots, etc):

A work form should be completed after each visit to your site and
emailed to eriks@louisvilleco.gov or mailed to:

City of Louisville
Attn: Erik Swiatek
739 S. 104th Street
Louisville, CO 80027



**-WORK FORM-
FOR A
GOLF COURSE ADOPTION**

Adopt Site:		Date of Work:
Group Name (if applicable):		
Start Time:	End Time:	
Participant Names		Hours Worked
1)		
2)		
3)		
4)		
5)		
6)		
7)		
8)		
TOTAL # Participants:	TOTAL Hours Worked:	
TOTAL Group Time Worked (total # participants X total hours worked):		

Work Completed (e.g. divot repair, invasive plant removal, cart washing and cleaning, cart path maintenance and repair, painting, fence repair, flower planting, clean-up of waterways, trash pick-up, and mulching, etc):

Notes for Staff - additional repairs or maintenance needed at the site (vandalism, cart path conditions, parking lots, etc):

A work form should be completed after each visit to your site and emailed to davidd@louisvilleco.gov or mailed to:

Coal Creek Golf Course
Attn: David Dean
585 W. Dillon Road
Louisville, CO 80027



VOLUNTEER APPLICATION

(Revised August 2006)

* All spaces on this application must be completed, and it must be signed and dated.* Department: _____

VOLUNTEER INFORMATION		
Name: (Last) (First) (Middle)	Social Security Number:	Date of Birth:
Street Address:		City, State, and Zip Code:
Phone Number: (Home) (Work)	Driver's License Number:	
Email address:		

VOLUNTEER INTEREST
What will you be volunteering for?
List below any areas interested and skills which may relate to your area of volunteer interest:

BACKGROUND
How long have you lived in Colorado? _____ If less than one year, please list your previous address and how long you lived there.
If less than one year, please provide your previous address and how long you lived there.
Address: _____ How long? _____
*If the person has lived in Colorado for less than one year at the time of their application, the City will conduct additional background investigations in the state where the applicant previously resided. The City will conduct background investigations on returning volunteers on an annual basis.
*Persons under the age of 18 years shall provide two adult, non-relative references for consideration by the City. Appropriate references may include teachers, neighbors, or previous or current employers.
Have you ever been charged with a crime that resulted in an adjudication of guilty, no contest, deferred judgment, deferred prosecution or conviction of any law violation (except minor traffic violations)? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, list for each conviction: (1) date of offense; (2) charge; (3) jurisdiction; (4) court name and (5) disposition.
*The City may reject a volunteer applicant or discharge a volunteer if a background investigation reveals an arrest, conviction or pending charges.
Have you ever been involved in an incident involving child/elder abuse or child/elder neglect? <input type="checkbox"/> YES <input type="checkbox"/> NO If Yes, please explain below:
Has your driver's license ever been suspended or revoked, or have you ever been denied a driver's license? <input type="checkbox"/> YES <input type="checkbox"/> NO If Yes, please explain below:

WORK EXPERIENCE
Name of Organization: _____ Address: _____
Dates of Employment: _____ Supervisor's Name: _____ Phone Number: _____
Duties: _____
Name of Organization: _____ Address: _____

Dates of Employment:	Supervisor's Name:	Phone Number:
Duties:		

REFERENCES	
Persons under the age of 18 years shall provide two adult, non-relative references	
Name:	Relationship:
Phone Number:	Duties:
Name:	Relationship:
Phone Number:	Duties:

EMERGENCY CONTACT INFORMATION	
Name:	Relationship:
Phone Numbers: Home:	Work:
Name:	Relationship:
Phone Numbers: Home:	Work:

SIGNATURE, CERTIFICATION, RELEASE OF INFORMATION, AND RELEASE OF LIABILITY				
<p>I certify that the information in this application is true and complete. I understand that false statements, misrepresentations or omissions of information in this application may result in rejection of this application. The City is expressly authorized to investigate all statements contained in this application. I consent to the release of information about my ability and fitness for volunteer assignment by employers, schools, criminal justice agencies, and other individuals and organizations to investigators, personnel staffing specialists, and other authorized employees of the City of Louisville.</p> <p>In the event that I am selected to become a volunteer for the City of Louisville, I agree to comply with all of its ordinances, rules, and regulations. I fully understand and agree to provide my services to the City of Louisville as a volunteer in a voluntary capacity and that I will receive no compensation or benefits for services provided.</p> <p>I understand that I am NOT insured by the City of Louisville Worker's Compensation Insurance and NOT covered by any Accident Medical Insurance Policy while I am a volunteer with the City of Louisville. I authorize that all necessary first aid steps may be taken as prescribed by qualified personnel.</p> <p>I hereby release the City of Louisville, its officers, employees and agents from any and all claims, damages, cost or expense including attorney fees, and liability, including any claims of personal injury and property damage arising from my participation in the Volunteer Program. I grant full permission to use any photographers, videotapes, recording or any other record of this program for any purpose.</p> <p>The City will provide any applicant or volunteer who is rejected or discharged as a result of a background investigation information on how to obtain the report and contact information for the reporting agency. Determinations to reject an applicant or discharge a volunteer as a result of the criminal background investigation report are final.</p> <p>*The City may reject a volunteer applicant or discharge a volunteer for any reason or no reason at all.</p> <p>BY SIGNING BELOW, I AGREE THAT I UNDERSTAND AND CONSENT TO THE ABOVE STATEMENT:</p>				
<table> <tr> <td>VOLUNTEER'S SIGNATURE:</td> <td>DATE:</td> </tr> <tr> <td>If Volunteer is Under 18, Signature of Parent/Guardian:</td> <td>DATE:</td> </tr> </table>	VOLUNTEER'S SIGNATURE:	DATE:	If Volunteer is Under 18, Signature of Parent/Guardian:	DATE:
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