



**Yes!**

**I/we want to be a part of the  
2018 Springs In Bloom Program  
by adopting a City flower bed!**

## **APPLICATION FOR ADOPTION**

**Today's Date:** \_\_\_\_\_

**Preferred Adoption Location:**

1<sup>st</sup> Choice: \_\_\_\_\_

2<sup>nd</sup> Choice: \_\_\_\_\_

3<sup>rd</sup> Choice: \_\_\_\_\_

**Adopter Name**

*(please indicate if you are a business or non-profit):* \_\_\_\_\_

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

**Home Phone:** (    ) \_\_\_\_\_

**Work Phone:** (    ) \_\_\_\_\_

**Mailing Address** *(street, city, state, zip):* \_\_\_\_\_

**Email** *(please print clearly):* \_\_\_\_\_

**Est. Number of Participants:** \_\_\_\_\_

### **STATEMENT OF AGREEMENT**

I have read and agree to abide by the policies, regulations and safety recommendations as put forth by the City of Colorado Springs *(for myself or as the representative of the group listed above)* in regard to the Springs In Bloom program. I understand that this is an application for the Springs In Bloom program and that the Parks, Recreation and Cultural Services Department will confirm the final adoption location.

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

## **CASH DONATION**

**I/we wish to make a cash donation toward the Springs In Bloom program  
in the amount of \$\_\_\_\_\_.**

Please make checks payable to "Parks, Recreation and Cultural Services"  
and mail to the address shown below. Also note that the donation is for the Springs In Bloom program.  
All donations are tax-deductible and will receive a written acknowledgement.

**PLEASE RETURN COMPLETED FORM TO:**  
**Parks, Recreation and Cultural Services      or email to [dsanchez@springsgov.com](mailto:dsanchez@springsgov.com)**  
**1003 Glen Avenue**  
**Colorado Springs, CO 80905**