



KEEP THE MIDLANDS BEAUTIFUL
KEEP AMERICA BEAUTIFUL AFFILIATE

Return to:
Keep the Midlands Beautiful
1305 Augusta Road
West Columbia, SC 29169
(803) 733-1139
programs@kmb.org

CITY OF COLUMBIA ADOPT-A-STREET AGREEMENT FORM

The City of Columbia and _____ (adopting group name) recognize the need and desirability of litter-free and visually improved streets.

The Adopt-A-Street program has been established for individuals, community and civic organizations, and private businesses and industries to contribute toward the effort of maintaining cleaner and more beautiful streets.

The individual participants of the named entity are aware of the potentially hazardous nature of the work that is to be performed and have agreed to follow the program's safety guidelines and instructions and have agreed to NOT hold the City of Columbia or Keep the Midlands Beautiful or their sponsors responsible for any injuries they may suffer or damages they may cause or suffer as a result of participation in the program.

The City of Columbia recognizes the above named entity as the adopting organization for _____ (street name) from _____ (street name or landmark) to _____ (street name or landmark) in the City of Columbia.

The above entity's volunteers accept responsibility for picking up litter along its section of street four times a year for a period of two years beginning _____, 20__ and ending _____, 20__.

The above-mentioned entity understands that the City of Columbia may terminate this agreement and/or remove the Adopt-A-Street signs bearing the program participant's name or acronym if it finds and determines that the group is not meeting the terms and conditions of this agreement and of the total program.

The above-mentioned entity has written its name in the boxes below as it is to appear on the signs. Because of the limited spacing on the Adopt-A-Street signs, group names may have to be abbreviated.

Line 1

Line 2

Line 3

Please allow one space after each name. Commas, colons, hyphens, etc. are counted as letters.

OFFICIAL SIGNATURES

Authorized Organization Representative

Signature_____

Print Name_____

Title_____

Phone Number_____

Street Address_____

City, Zip Code_____

E-Mail_____

Adopt-A-Street

Keep the Midlands Beautiful

Director of Public Works

Solid Waste Director

Other Group Contacts Are:

Name _____ Email _____ Phone _____

Name _____ Email _____ Phone _____

By their signatures, the following persons have agreed to participate in four litter pick-ups and abide by the program guidelines and to NOT hold the City of Columbia or Keep the Midlands Beautiful or their sponsors responsible for any injuries they may suffer or damages they may cause or suffer as a result of participation in the program.

Name	Date
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Name	Date
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Before submitting this form, the Group Leader must complete the 15 to 30 minute self-paced online Orientation and Safety Training, available at [Safety Training - AAH & AAS](#).

___ I have completed this training.