



**City of Rockville, Maryland**

**ADOPT-A-STREAM PROGRAM  
Application and Agreement**

As stewards of the City of Rockville's water resources, we,  
the members of \_\_\_\_\_,  
request permission to adopt segment \_\_\_\_\_  
located in the \_\_\_\_\_ watershed.

Name of -Adopting Group: \_\_\_\_\_

Number of stream cleanups per year (two recommended): \_\_\_\_\_

Primary Designated Representative: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Daytime Telephone Number(s): \_\_\_\_\_

Email address: \_\_\_\_\_

Secondary Designated Representative: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Daytime Telephone Number(s): \_\_\_\_\_

*If selected to participate in the City of Rockville's Adopt-A-Stream Program, the Adopting Group agrees to comply in all respects with, and perform all stream cleanup work in accordance with, the City of Rockville's Adopt-A-Stream General Program Conditions and Safety Guidelines, which are attached to this Application and Agreement and incorporated herein by reference, and to provide a copy of said Program Conditions and Safety Guidelines to each stream cleanup participant working under the auspices of the Adopting Group.*

*The Adopting Group acknowledges that the City of Rockville is not responsible for the conditions in and around the stream or the safety of the stream cleanup participants and agrees to at all times indemnify and hold harmless the City of Rockville, its officers, employees, agents, successors and assigns, from any and all claims for damages arising in any way from the activities, action or inaction of the Adopting Group, its members, employees, agents, or volunteers or any other group or individual working with, or under the auspices of, the Adopting Group (the stream cleanup participants) in conducting the stream cleanup. The Adopting Group further agrees to require each stream cleanup participant to execute the City's "Informed Consent; Liability and Hold Harmless; Publicity Permission" form before participating in any stream cleanup.*

As a designated representative of (name of group) \_\_\_\_\_, I have read, understand and shall comply with the Adopt-A-Stream general program conditions and safety guidelines regarding participation in the program.

Please provide printed name and title of person signing for group and written signature and date.

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please mail or fax to:

Adopt-A-Stream  
City of Rockville  
30 Courthouse Square  
Rockville, Maryland 20850  
Fax: (240) 314-8309