



## Application for Adoption

**Yes! I/we want to be a part of 2015 Springs in Bloom Program  
by adopting a City flower bed!**

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

Preferred Adoption Location: \_\_\_\_\_

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

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

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

Adopter Name:  
(if an organization) \_\_\_\_\_

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

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

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

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

Estimated Number of Participants: \_\_\_\_\_ Anticipated Planting Date:  
(between May 16 & June 5) \_\_\_\_\_

### 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 in the amount of \$ \_\_\_\_\_

*Please make checks payable to Parks, Recreation and Cultural Services and note the donation is for the Springs in Bloom.*

**All donations are tax-deductible and will receive a written acknowledgement.**

**Please return completed form to:**

**MAIL:** Parks, Recreation and Cultural Services  
1401 Recreation Way  
Colorado Springs, CO 80905

**OR**

**FAX:** (719) 385-6579  
Attn: Springs in Bloom - Donna Sanchez

**Springs in Bloom • Attention: Donna Sanchez**

City Greenhouse • 1003 Glen Avenue • Colorado Springs, CO 80905  
P: (719) 578-6649 • F: (719) 385-6579 • Email [dsanchez@springsgov.com](mailto:dsanchez@springsgov.com)