



**City of Knoxville Department of Parks and Recreation  
Adopt a Park Enrollment Application**

Application Date: \_\_\_\_\_

Name of Park or Greenway to be adopted: \_\_\_\_\_

Intended length of commitment (minimum of 1 year): \_\_\_\_\_

Adopting Individual or Organization: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Contact Mailing Address: \_\_\_\_\_

Contact email: \_\_\_\_\_

Adopt a Park Committee members: \_\_\_\_\_

Please indicate exactly how you wish your name to appear on the Adopt a Park sign of recognition:

\_\_\_\_\_

Please briefly list your goals for the Adopt-a-Park

program: \_\_\_\_\_

\_\_\_\_\_

How did you hear about the Adopt-a-Park program?: \_\_\_\_\_

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*Please send completed form to:*

City of Knoxville  
Department of Parks and Recreation  
P.O. Box 1631, Knoxville, TN 37901.

Thank you for your interest in the Adopt a Park program! Upon the approval of this application, applicants will receive confirmation along with a certificate that recognizes that you or your organization has adopted the park.