



25th Annual Lakes, Rivers and Coastal Cleanup
September 20, 2014



AGREEMENT

Submittal deadline: Friday, September 5th at 5 PM

Please mail, email, fax or deliver the completed Agreement, Participant Sign-up Sheet and Map to:

Citrus County Water Conservation
3600 W Sovereign Path, Suite 202
Lecanto, FL 34461
Debra.Burden@bocc.citrus.fl.us
(352) 527-5429 fax

Need more information, call: (352) 527-7684

Thank you for making a difference in the health and quality of Citrus County's waters!

I, _____, hereinafter called the *Group Leader* recognize the need and the desirability of litter-free waterways. This Agreement allows those individuals listed on the Participant Signup Sheet to participate in the cleanup effort on September 20, 2014.

Additionally, by signing below, the Group Leader acknowledges the hazardous nature of the work and agrees to the following terms and conditions:

- Any participants 17 years of age or younger, shall have adult supervision.
- All participants under age 6 **MUST** have one-on-one adult supervision to participate.
- The Group Leader must attend the **mandatory** safety meeting on Monday, September 15, 2014, at 6:00 p.m. in room 166 of the Lecanto Government Building, 3600 W. Sovereign Path, Lecanto, FL.
- If the Group Leader is unable to attend the safety meeting, another group representative **MUST** attend.
- The Group Leader shall share the safety meeting information with ALL group participants, prior to cleanup.
- Groups shall choose specific sections of waterway/shoreline for debris removal and **CIRCLE** on page 4 map provided.
- Participants shall submit the completed data cards at the time of debris drop-off. If necessary however, data cards can also be delivered to the Water Conservation Office (address above) by Friday, September 26, 2014. The data is compiled and sent to the Ocean Conservancy for a national database.
- Groups using a boat during cleanup shall abide by all laws that pertain to safe boating.

Group Leader Name: (Last) _____ (First) _____

Group Name: _____

Cleanup Location: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

E-Mail Address: _____

Preferred Contact Phone Number: _____ Alternate Number: _____

Signature of Group Leader: _____



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PARTICIPANT SIGNUP SHEET

Group Leader Name: (Last) _____ (First) _____

Group Name: _____

Preferred Contact Phone Number: _____ Alternate Number: _____

Cleanup Location: _____

Circle Debris Drop-off location: East West 1 2 3 4 5 (see details on page 4)

ALL participants will receive a shirt. However, shirts sizes are not guaranteed. Shirt size priority is given by order of application. Possible sizes: (Youth) YS, YM, YL (Adult) S, M, L, XL, XXL, XXXL

PLEASE PRINT CLEARLY

	Participants Name	Shirt Size	E-mail Address	Phone Number
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	Participant Name	Shirt Size	E-mail Address	Phone Number
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Attach Additional Sheets if Necessary



MAP

- 1) Circle (using any color other than black) the area(s) your group will be picking up debris.
- 2) Circle the Debris drop-off location(s) you plan to use.

