

Basic Forms Packet

Keep Columbus Beautiful

- Page 1** **PACKET SUMMARY**
- Page 2** **EVENT REGISTRATION FORM**
Complete this form and submit by email or fax as soon as you know the date of your event. AAA's groups may use one form and enter all their future cleanup dates if known. Return this form as far in advance of your event date as possible to allow KCB opportunity to plan for your supply needs.
- Page 3** **TOOL & SUPPLY LIST**
This form lists most of our common tools used for litter cleanups and garden beautification. It is important that this form be submitted at the same time as your registration form. Remember to mark the date and time supplies can be picked up and returned at the bottom of the page.
- Page 4** **EVENT ACTIVITY SUMMARY**
After each event complete this form and send back via email or fax. Please do so within 48 hours after the event has ended. Please fill in as many stats as you can; all events include the number of volunteers, starting/ending time; litter cleanups include the number of bags.
- Page 5** **ADOPT-AN-AREA REGISTRATION**
To adopt an area and commit to cleaning it up a minimum of 3 times a year this form must be completed and returned via email or fax for approval. This form is completed once for the initial adoption request and renewed each time thereafter at the end of each adoption period. The initial adoption shall be for 2 years.
- Page 6** **ADOPT-AN-AREA LIABILITY RELEASE**
Necessary for all Adopt-An-Area groups to complete and submit.
- Page 7/8** **CLEANUP SAFETY CHECKLIST** (with Dog Bite Prevention tips)
It is highly recommended that these guidelines are reviewed for each event.
- Page 9** **HOW TO SAFELY PICKUP NEEDLES/SYRINGES**
- Page 10** **VOLUNTEER COMMITMENT & LIABILITY RELEASE**



Keep Columbus Beautiful

Event Registration Form

1265 Marion Rd, Columbus, OH 43207
Telephone: 614-645-2421 Fax: 614-645-7747

EMAIL TO: KEEPCOLUMBUSBEAUTIFUL@COLUMBUS.GOV

Organization/Individual Identification

ALL CONTACT INFORMATION MUST BE CHECKED FOR ACCURACY AND WILL BE POSTED ON THE KCB WEBSITE. PLEASE INCLUDE STARTING LOCATION FOR YOUR EVENT. COMPLETION AND SUBMISSION OF THIS FORM ELECTRONICALLY OR OTHER MEANS, CONSTITUTES PERMISSION TO POST ALL CONTACT INFORMATION ON THE KCB WEBSITE FOR THE GENERAL PURPOSE OF PROMOTING GREATER VOLUNTEER INVOLVEMENT.

Name of Organization: _____

Address: _____

City: _____ State: _____ Zip: _____

Contact: _____ Daytime Phone #: _____

E-mail Address: _____

Alternate: _____ Daytime Phone #: _____

E-mail Address: _____

Please submit the attached Tool Supply List with your registration form.
After your event is completed, fill out and submit the following Event Activity Summary.

Activity Information

Date(s) of event(s): _____ Time(s): _____

Rain date(s) (optional): _____ Time(s): _____

A RAIN DATE MAY CONFLICT WITH OTHER PLANNED EVENTS & RESOURCES NOT AVAILABLE

IF EVENT TIMES CHANGE, PLEASE INFORM KCB IMMEDIATELY

Estimated number of volunteers: Adults _____ Children _____

Event(s): *Litter Cleanup* *Beautification/Community garden* *Other*

Details of event (provide street boundaries for cleanups):

Does this area have alley collection of refuse? (circle one) Yes No

Are you using a private hauler for your cleanup? Yes No

If yes, which company? (include contact & phone) _____

If no, please give the exact location where bagged trash is to be collected:



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Event Tool & Supply List

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Keep Columbus Beautiful has the following supplies and tools available for litter cleanups and beautification projects. We also have Graffiti Paint out supplies. Please indicate the number of items you will need for your event, and submit this list with your Event Registration form.

CLEANUPS, BEAUTIFICATION, AND COMMUNITY GARDENS

Cleanup Date

| <u>Supplies</u> | <u># Needed</u> | |
|---|----------------------|---------------------------------------|
| Glad® Bags | <input type="text"/> | Please return unused bags |
| Brown Jersey Gloves | <input type="text"/> | Please return gloves washed and dried |
| <small>LIMITED SUPPLY</small> | | |
| Note: All tools must be returned to Keep Columbus Beautiful following your clean up. For weekend events, tools & supplies <u>must</u> be scheduled for return the following Monday or Tuesday. | | |
| <u>Tools</u> | <u># Needed</u> | <u>Tools</u> |
| Brooms - Push | <input type="text"/> | Wheelbarrow |
| Brooms - Corn | <input type="text"/> | Litter Grabber |
| Shovel-Large Scoop | <input type="text"/> | Butt Kicker |
| Shovel-Short Small Scoop | <input type="text"/> | Weeder |
| Shovel-Long Small Scoop | <input type="text"/> | Garden Rakes |
| Shovel-Long Med Scoop | <input type="text"/> | Leaf Rakes |
| Shovel-Pointed Tip | <input type="text"/> | Safety Vests |
| Edger | <input type="text"/> | Spade |
| Hoe | <input type="text"/> | Lopper |
| Blue Bucket 5 Gal | <input type="text"/> | Shearer |
| | | <input type="text"/> |

The KCB Visitor & Supply Center hours 7:30 am – 4:00pm daily Monday-Friday

Supply pickups and returns must be Monday – Friday by appointment. Please plan ahead, we will confirm all appointments and will have your order ready.

Indicate what is best for you

Contact Person:

Daytime Phone #:

SUPPLY PICKUP DATE:

TIME:

REMARKS

SUPPLY RETURN DATE:

TIME:

REMARKS



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Please return via email or fax to KCB. Include 1 large group photo and individual action shots of your event! Photos may be emailed after your event in jpeg format, 5 megabyte or less preferred.

★ Please complete this form immediately after your event

Name of Organization: _____

Event Planner: _____

Address: _____

Daytime Phone No.: _____ E-mail Address: _____

Date of Event: _____

TYPE OF ACTIVITY:

Litter Cleanup Number of Participants Start Time End Time

Beautification Number of Participants Start Time End Time

Other Green Event Number of Participants Start Time End Time

PLEASE FILL IN PERTINENT INFORMATION FOR YOUR EVENT:

Approximate number of garbage bags filled:

Number of bags of recycled items filled:

Miles of streets/roads/highways cleaned:

Miles of hiking/biking/nature trails cleaned:

Acres of parks/public lands cleaned:

Number of trees planted:

Number of cell phones collected to be recycled:

Number of graffiti sites abated:

Number of tires collected to be recycled:

Sq. feet of graffiti tag:

Brief description of event/unusual things collected: _____

**Activity Summary forms should be returned as soon as possible to
Keep Columbus Beautiful.**



END LITTERING

Keep Columbus Beautiful

“Adopt an Area” Registration Form

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Keep Columbus Beautiful is a volunteer-driven City of Columbus community improvement program within the Department of Public Service and an award-winning affiliate of national not-for profit Keep America Beautiful. Our program provides equipment, supplies and assistance to over 9000 participants per year.

The KCB Adopt an Area program is designed to ensure our main **arteries and major urban corridors** throughout the city remain litter-free and create a positive first –impression of our neighborhoods. As an Adopt an Area Partner you are committing to ongoing abatement of visible trash and debris along the public right of way so these streets remain a safe and economically viable asset to each given community.

Name: _____
(Individual or Organization)

Address: _____

City: _____ State: _____ Zip Code: _____

Phone Numbers: _____
(Day, evening, cell, others)

Email Address: _____

Officers (of the organization): _____

(I), (We), hereby “adopt” the area described below and pledge to conduct a litter or trash cleanup at least three times a year:

Area: _____

In honor of your pledge to END LITTERING in Columbus, an official Adopt an Area street sign with the name your organization will be placed in the adopted area after the 2nd cleanup.

Signature: _____
(Individual or Officer of Organization)

Effective Starting Date: _____
(At least two years are required)

Renewal Date: _____
(Renewals are for two years)



Keep Columbus Beautiful

ADOPT AN AREA PARTNERSHIP COMMITMENT & LIABILITY RELEASE

1265 Marion Road, Columbus, OH 43207
Telephone: 614-645-2421 Fax: 614-645-7747

EMAIL TO: KEEPCOLUMBUSBEAUTIFUL@COLUMBUS.GOV

Date:

I, the undersigned Permittee, as a member of the have reviewed the Adopt an Area brochure and safety guidelines agree to commit to a two year maintenance partnership. As part of the consideration for the City of Columbus allowing me/organization to participate in the above program, I do hereby consent and agree as follows:

INDEMNIFICATION

The Permittee, for himself/herself/itself, contractors, workers, agents, or anyone working in concert with the Permittee agrees to indemnify and hold harmless the City of Columbus, Keep Columbus Beautiful and their respective officials, employees and other agents and representatives, against any loss, claim, cause of action, damage, or liability whatsoever, whether without limitation strict or absolute liability in tort or by statute imposed, charge, cost or expense, including without limitation, attorney's fees to the extent permitted by law, which may be incurred in connection with, or in any manner arising out of any damage or loss to property or injury or death of any person resulting from, or arising out of, without limitation the operation of this permit. In no event shall the permittee or any of his/her/its contractors, workers, agents, or any third party with whom he/she/it contracts be considered the officers, employees, agents or other representatives of the City of Columbus Keep Columbus Beautiful.

The Permittee is hereby warned, of personal liability for injuries and damages and it is required that activities be covered by liability insurance.

SIGNATURE

PRINTED NAME

ADDRESS



Cleanup Safety Checklist

- Designate a safety officer whose only responsibility is safety and trouble-shooting. This person should have a first aid kit, a cell phone, and a list of emergency phone numbers. *Review this safety checklist with volunteers before they get to work.*
- Ask volunteers to sign the liability release/sign-in sheet – this is probably the best way to direct their attention to the need to follow safety rules.
- DRESS properly; wear heavy shoes and long pants; gloves use sunscreen and insect repellent when appropriate.
- DRINK plenty of fluids, avoid over-exertion, get help with large objects. Use proper lifting and bending techniques.
- Do not overstuff bags or pickup anything that could be hazardous to your health.
- **NEEDLES, sharp or unusual objects. If found needles should be placed into a hard plastic pop bottle with cap using the litter grabber provided. Only then may bottles (with needles) be placed in the trash bag. TEAM Leader should have at least one bottle for their group with their supplies. Also whenever found please report the location to someone in authority for follow up.**
- When near a road, wear bright colors, work in groups, and always face on-coming traffic. IMPORTANT--Wear your SAFETY VEST!
- INSECTS -Check each other for ticks. If you are stung by a bee/wasp and fear a life threatening allergic reaction, call 911.
- POISON-Be aware of poison ivy or other poisonous or sharp plant materials. Protect with long sleeve shirts and pants.
- ANIMALS- when cleaning up in neighborhoods you may encounter unfriendly dogs. If approached by a growling or angry animal stand still, *do not* run or make direct eye contact. Move slowly away from the animal when appropriate. See dog bite prevention tips (next page)
- Snakes usually “non-poisonous” reside in wooded and wet areas, abandoned tires; be cautious at all times.



Dog Bite Prevention

Don't Invite a Bite!

Dogs may bite for a variety of reasons...fear of a strange person, territorial aggression, protecting a litter of puppies, etc. Dogs who are injured or not properly socialized with people are also more prone to biting out of fear.

To avoid becoming the victim of a bite, follow these tips:

- Never approach a dog you do not know.
- Assume any dog you don't know, may bite.
- Avoid direct eye contact with aggressive dogs.
- Never disturb a dog who is sleeping, eating or protecting puppies.

If a strange dog approaches you:

- Remain calm ~ do not scream or yell.
- Freeze and remain still. Avoid sudden movements. Above all, do not run, as this invites a chase.
- Turn your head away slightly, avoid direct eye contact.
- Be patient. Wait until the dog loses interest and back away slowly.

If you are attacked by a dog:

- Seek cover and try to use any object you have to place between you and the dog ~ a coat, book bag, etc.
- Try to stay on your feet.
- If knocked down, curl into a ball on your knees and use your arms to protect your face and neck.

Report dog bites to:

- In the city of Columbus & Worthington, call the Columbus Health Department at 645-6134.
- Any other location in Franklin County, call the Franklin County Public Health at 525-3160.

How to safely pick up Needles/Syringes:

- Place an uncapped plastic bottle on the ground.
- Depending on what is easier for you, the bottle can be standing upright or laying on it's side.
- Do NOT touch or hold onto the bottle again until the syringe is securely inside, and you are ready to recap the bottle.
- Using the litter grabbers pick up the needle/syringe and place it into the bottle.

-IMPORTANT: WHEN PLACING THE NEEDLE INTO THE BOTTLE UNDER NO CIRCUMSTANCES SHOULD YOU TOUCH, OR HOLD ONTO, THE BOTTLE. This could result in you accidentally sticking yourself with the needle.

-Once the needle is entirely inside the bottle, very carefully grab the bottle and recap it (make sure the lid is tight and secure) and place it into a trash bag.

-When placing a syringe/needle into a bottle it should be done with *ONE HAND ONLY (the one holding the litter grabber)*. Please put your other hand behind your back, so you are not tempted to use it to hold or touch the bottle. Touching or holding onto the bottle when you are putting the syringe into it, can result in accidentally sticking yourself with the needle.



DATE: _____



VOLUNTEER COMMITMENT AND LIABILITY RELEASE

The undersigned as a participating member of the PERMITTEE; an outside agency or third party group engaged in a volunteer service cleanup or beautification activity, recognize and assume all risks and injury, hereby agree that the following agency, KEEP COLUMBUS BEAUTIFUL, will be held harmless, not be liable or legally responsible for any injury sustained by the participant, or for loss or damage to property owned or in the possession of the participant during or as a result of participation in this volunteer service activity. In no event shall the PERMITTEE or any of his/her/its contractors, workers, agents, or any third party with whom he/she/it contracts be considered the officers, employees, agents or other representatives of the CITY OF COLUMBUS KEEP COLUMBUS BEAUTIFUL. The undersigned is being informed of suggested safety guidelines located on the back of this form. *As part of the consideration for the City of Columbus allowing me the undersigned as a participating member of the PERMITTEE under said PERMITTEE, outside agency or third party group organization to participate in service, I do hereby consent and agree to release permission for KEEP COLUMBUS BEAUTIFUL to use and share photos taken of participants of this activity.*

| | NAME | FIRST & LAST | GROUP NAME /EVENT | CELL # | E MAIL |
|-----|-------------|-------------------------|--------------------------|---------------|---------------|
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| 16. | | | | | |

This signed release form is to be returned upon completion of said activity to Keep Columbus Beautiful 1265 Marion Rd Columbus Ohio, 43207