

WEST VIRGINIA



WEST VIRGINIA STATE PARKS & FORESTS ADOPT-A-TRAIL PROGRAM APPLICATION

CONTACT INFORMATION

Organization Name: _____

Representative Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Email: _____

Requested Park/Forest Name: _____

Requested Trail Name/or Trail Location: _____

Starting Point: _____ Ending Point: _____

PARTICIPANT INFORMATION

Number of Participants: _____ Under 18 _____ Over 18

The organization, business, family or group named above has read and agrees to the terms and conditions of the Adopt-A-Trail Program:

Representative's Signature: _____ Date: _____

ADMINISTRATIVE APPROVAL

(For WVDNR Use Only)

WVDNR Approval: _____ Date of Approval: _____ Expiration: _____

Park/Forest Name: _____ Trail Name/Location: _____

Copies To: Organization; Parks & Recreation Section; Area Superintendent. Ensure all volunteers have completed a Volunteer Agreement

MAIL COMPLETED APPLICATIONS TO:

West Virginia State Parks
Adopt-A-Trail Program
State Capitol Complex, Building 4, 112 California Ave.
Charleston, WV 25305-004

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WEST VIRGINIA STATE PARKS & FORESTS ADOPT-A-TRAIL PROGRAM AGREEMENT

Volunteer groups (Groups) that want to participate in the Adopt-A-Trail program shall apply to the Division of Natural Resources, (Division) Parks and Recreation Section. Applications shall be reviewed and approved or denied at the Division's discretion.

This program may include, but is not limited to these groups: communities, families, individuals, members of 4-H or Future Farmers of America, scouting organizations, any faith based group, schools, college organizations, businesses, civic organizations or government agencies.

Groups shall not perform any activity on a trail or trail segment until approved by the Division with an Adopt-A-Trail agreement executed by all parties.

The Division may provide for more than one group to adopt an eligible trail or trail segment.

Groups shall volunteer in the program for a term of at least two years.

All members of the group shall complete and submit for approval a Volunteer Agreement during the term of this agreement. Any new members must complete a Volunteer Agreement prior to any volunteer work on Division land.

Groups shall consist of people who are 18 years or older. Participants 17 years of age or younger may participate, but must be accompanied by an adult who is 18 years of age or older with a close relationship or connection to any participant 17 years of age or younger.

The Group and participants thereof shall acquaint themselves and follow all WV State Parks Rules and Regulations.

The Group shall be required to coordinate all proposed trail activities, along with proposed dates of volunteer days with the area superintendent, and such shall be subject to the area superintendent's approval.

Adopted trails may be identified by a sign at a location determined by the area superintendent along the adopted section bearing the Adopt-A-Trail logo and the name of the Group after the Group completes 50 hours of service.

To obtain credit, Groups must fully complete and submit a Trail Volunteer Report to the area superintendent.

The Division shall coordinate with the closest solid waste authority, to ensure that the trash is properly disposed of with proper documentation. Groups shall place all collected litter at designated locations as approved by the area superintendent.

Garbage bags, gloves, and garbage pickers will be provided by the Park / Forest where the activity is taking place.

Activities performed by groups may not involve work that: reduce hours or compensation of Department or Division employees, could be performed by a laid-off department or division employee, or are inconsistent with the terms of a collective bargaining agreement.

The West Virginia Division of Natural Resources may propose rules pursuant to §29A-3-a et seq. Of this code to carry out and implement the Adopt-A-Trail Program.

The adopting organization agrees to abide by all Terms and Conditions of this Agreement.

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TRAIL VOLUNTEER REPORT

Group/Organization Name: _____

Please put organization name exactly as you want it to appear on the sign.

Date of Volunteer Day: _____

Trail Name/Description: _____

Start Time: _____ End Time: _____

Total Time: _____

Number of Participants: _____ Under 18 _____ Over 18

Grand Total Volunteer Hours: _____

Representative Name: _____

Email: _____

Phone: _____

Description of work preformed/metrics (bags of trash collected, etc):

Representative's Signature: _____ Date: _____

Superintendent's Signature: _____ Date: _____

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