

NEW

Interested in beautifying your residential and commercial areas by involving volunteers?

COMMUNITY IMPACT PROGRAM

**Are you a Group
or Organization?
Apply Today!**

**Receive up to \$1000 in a
matching grant for
materials, supplies or
equipment.**

This program can assist with:

- Painting Homes
- Minor Landscaping
- Street Adoption
- Graffiti Removal
- Cleaning Up Vacant Lots
- Clearing Debris from Neighborhood Streets.

Such as:

- Paint
- Painting Supplies
- Landscaping Materials
- Cleaning Supplies
- Safety Equipment
- Graffiti Removal Materials
- and Much More!



COMMUNITY IMPACT PROGRAM

Inspiring Meaningful Projects and Community Transformation

Program Overview

The Community Redevelopment Agency (CRA) aims to improve the quality of life in the CRA District through its Community IMPACT program, which fosters community transformation. This initiative emphasizes beautifying residential and commercial areas and enhancing the environment by involving volunteers in various projects. **Activities under this program include painting homes, minor landscaping, street adoption, graffiti removal, cleaning up vacant lots, and clearing debris from neighborhood streets.**

Participation Requirements

- Volunteers must be at least 14 years old (if you're under 18, you'll need consent from a parent or guardian).
- Join a orientation session that will review safety rules and what to expect from the project.
- Dress appropriately and wear any necessary protective gear for the tasks involved.
- All volunteers are required to sign a liability waiver
- Target months for project dates will be April, August, and December 2025

Project Categories and Eligible Locations

Please note: ALL locations must be within the CRA District

Project Categories

- Residential Beautification
- Commercial District Enhancement
- Street & Sidewalk Maintenance
- Vacant Lot Restoration
- Public Space Revitalization

Eligible Locations

- Downtown Bartow
- Bartow Trail
- Parks
- Vacant Lots/Storefronts
- East & West Areas within CRA District
- Other locations where a need for change is prevalent (reviewed on a case-by-case basis)

Funding for this program is based on budget availability and will be considered on a first-come, first-served basis. Application submission does not guarantee approval.

For more information please contact Cheryl Baksh, CRA Business & Community Engagement Coordinator at 863-534-0100 EXT.2771 or email cbaksh@cityofbartow.net

IMPACT Program Application

Name of Group or
Organization:

Date:

Contact Responsible for Application and Project Implementation

Name:

Phone:

Email:

Address:

Project Location:

Is this Area:

- Privately Owned Home Neighborhood Streets Commercial Alleyway
- Public Space (i.e. park, community gathering space, plaza) Vacant Lot
- Other (If box is checked, please explain)

Project (provide a brief description of proposed beautification project):

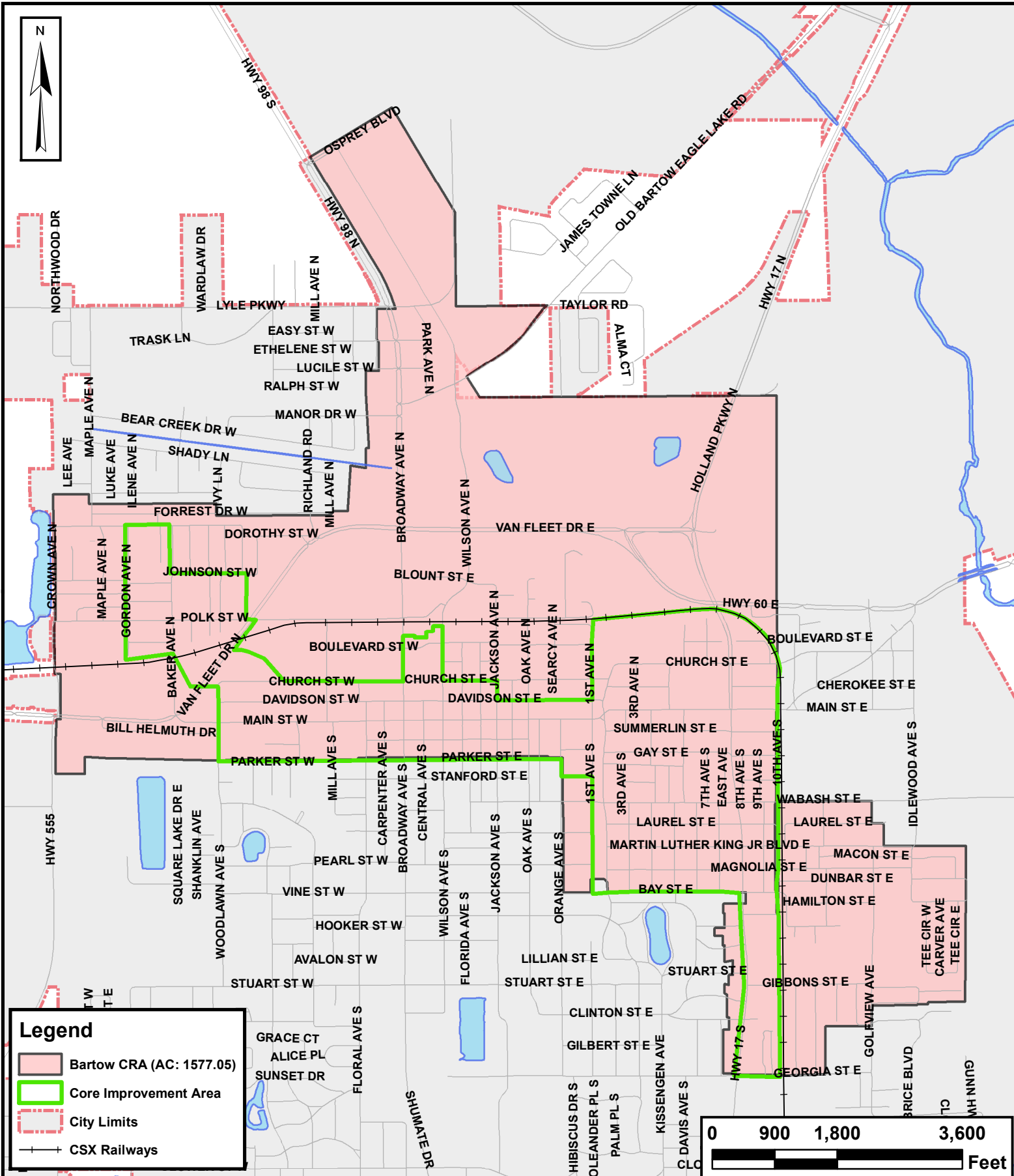
Please submit the below documents with your completed application:

- **Budget Plan** - This will include the estimated budget outlining the cost of materials and equipment for project.
- **Volunteer List** - List the number of volunteers participating.
- **Signed Liability Waiver** for all volunteers

By signing below you understand and agree to the terms of this program.

Signature

Date



Bartow CRA 1,577.05 Acres

January 2021

Core Improvement Area

City of Bartow



City of Bartow
Community Redevelopment Agency

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VOLUNTEER PARTICIPANT REGISTRATION FORM, AUTHORIZATION, RELEASE, WAIVER, INDEMNITY AGREEMENT AND PHOTO RELEASE

CAUTION: THIS AGREEMENT CONTAINS A RELEASE AND WAIVER OF CLAIMS AND AN INDEMNITY CLAUSE. READ BOTH PAGES OF THIS AGREEMENT BEFORE SIGNING. IF UNDER THE AGE OF EIGHTEEN (18), HAVE A PARENT OR GUARDIAN READ AND SIGN THIS FORM FOR YOU.

Volunteer Information:

First Name: _____ M.I.: _____ Last Name: _____

Address: _____ Birthdate: _____ / _____ / _____
Street City Zip Month Day Year

Phone Number: _____ Home Mobile Work

Email Address: _____

Registering Family Member, if Volunteer is a Minor: _____

Emergency Contacts / Persons Authorized to Pick Up Minor Child Volunteer:

First Name	Last Name	Phone Number	Relationship*

**Relationship to Authorizing Parent or Guardian, if Participant is a Minor*

In consideration of me or the minor child participant identified above ("Participant") being able to participate in all activities conducted in full or in part by the City of Bartow, Florida and/or the Bartow Community Redevelopment Agency (collectively, the "CRA") as part of the IMPACT Program ("Activities") and to use all equipment made available by the CRA ("Equipment"), I agree to the following:

- I hereby agree, personally or on behalf of my minor child, that participation in the Activities and use of the Equipment is only granted by the CRA because of its understanding that in the event of injury to me or my child, or damage or loss of property, that any insurance policy held by me or for my child which covers such injury or loss shall be the primary source of any recovery.
- I hereby acknowledge that participation in the Activities and use of the Equipment may be dangerous and involve the risk of serious injury, up to and including death, and property damage, which may be caused by the action, inaction or negligence of the Participant or the action, inaction or negligence of others, including the CRA.

Nonetheless, and in full understanding of the danger and risk, I, for myself or on behalf of my minor child, assume full responsibility for and risk of all bodily injury, death or property damage sustained while I or my child participate in Activities or use Equipment.

3. I, personally and on behalf of my heirs, personal representatives, executors and assigns, or on behalf of my child and my child's heirs, personal representatives, executors and assigns, **HEREBY RELEASE, ABSOLVE, DISCHARGE AND COVENANT NOT TO SUE** the Bartow Community Redevelopment Agency, its officials, officers, employees, and agents, both individually and in an official capacity for the CRA, from all liabilities, claims, demands, actions, damages, costs or expenses which I or my child may have against the CRA arising out of or in any way connected to my or my child's participation in the Activities, or use of Equipment, including travel to or from any such Activities, and for bodily injury, death or property damage suffered by me or my child before, during, or after said Activities. **I UNDERSTAND THAT THIS RELEASE AND WAIVER INCLUDES ANY CLAIM OR ACTION BASED ON THE NEGLIGENCE, ACTION OR INACTION OF THE CRA. I UNDERSTAND THAT THIS RELEASE AND WAIVER COVERS CLAIMS THAT MAY BE UNKNOWN AT THIS TIME.**

4. I will defend, hold harmless and indemnify the CRA, its officers, employees and agents, from and against all liability, loss, claims, damages, costs, attorneys' fees and expenses of whatever kind or nature which the CRA, its officers, employees, and agents may sustain, suffer, or incur, or be required to pay by reason of permitting me or my child to participate in the Activities and use Equipment, even if allowing me or my child to do so is later found to be wrongful or negligent.

5. I expressly agree that the foregoing release and waiver of liability and indemnity is intended to be as broad and inclusive as is permitted by the laws of the State of Florida or other State where a claim or action may be instituted and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect, without regard to draftsmanship.

6. This Agreement shall be governed by the laws of Florida as to all matters. Actions regarding this Agreement may only be brought in the County Court in and for Polk County, Florida or the Circuit Court of the Tenth Judicial Circuit in and for Polk County, Florida. This Agreement constitutes the complete understanding of the parties and merges and supersedes any and all other discussions, agreements and understandings, either oral or written, between the parties with respect to the subject matter hereof.

PHOTO RELEASE AUTHORIZATION

I hereby grant the CRA permission to use my or my child's likeness video and/or photograph in any and all of its publications, including website entries, without payment or any other consideration. I understand and agree that these materials will become the property of the CRA and will not be returned. I hereby authorize the CRA to edit, alter, copy, exhibit, publish or distribute this video/photo for purposes of publicizing the CRA and any other lawful purpose. In addition, I waive the right to inspect or approve the finished product, including written or electronic copy, wherein my or my child's likeness appears. Additionally, I waive any right to royalties or other compensation arising or related to the use of the video/photograph.

I AGREE to the Photo Release as defined above **I DO NOT** agree to the Photo Release as defined above

BY SIGNING MY NAME BELOW, I CERTIFY THAT: (1) I AM THE PARENT OR LEGAL GUARDIAN OF THE MINOR LISTED ABOVE OR AM OVER THE AGE OF EIGHTEEN (18); (2) I UNDERSTAND THAT I AM WAIVING IMPORTANT LEGAL RIGHTS TO RECOVER DAMAGES FOR INJURY AND/OR PROPERTY DAMAGE; (3) I HAVE READ AND VOLUNTARILY SIGN THIS RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT; (4) NO ORAL REPRESENTATIONS, STATEMENTS OR INDUCEMENTS APART FROM THE FOREGOING WRITTEN AGREEMENT HAVE BEEN MADE; AND (5) I HAVE READ AND VOLUNTARILY SIGN THE PHOTO RELEASE AUTHORIZATION

VOLUNTEER PARTICIPANT'S/PARENT'S/GUARDIAN'S SIGNATURE

DATE

Pursuant to Chapter 119, Florida Statutes, this record, and all information provided, is a public document that may be inspected or copied. If you believe any portion of this document contains information that is exempt from disclosure under Florida law, please contact the Bartow City Clerk at (863) 534-0100 or notify the City Clerk in writing at 450 North Wilson Avenue, Bartow, Florida 33860.