



624 Oak Grove Road, Chesapeake, VA 23320

757-382-7060

www.chesapeakearboretum.com

ACTIVITY FORM

REQUESTING INDIVIDUAL(S): _____
(Print Name(s))

REQUESTING ORGANIZATION: _____

Contact Person:

Name: _____ Title: _____

REQUIRED INFORMATION FROM INDIVIDUALS AND ORGANIZATIONS:

Telephone: Home _____ Work _____ Cell _____

Email Address: _____

Mailing Address: _____

PROPOSED PROJECT/ACTIVITY DESCRIPTION: (Attach additional sheet if necessary)

TIMEFRAME OF ACTIVITY/PROJECT Date(s) _____

List all known participants in Project/Activity: _____

Ultimate Project Goal: _____

IDEMNIFICATION AND HOLD HARMLESS AGREEMENT

Thank you for your proposed involvement with the Chesapeake Arboretum! Your signature indemnifies the City of Chesapeake, the Chesapeake Arboretum (and its Board of Director, staff or other designees) from any and all claims of damages or liability of any kind for injuries to persons or property, including the death of any person, occurring on the Arboretum property or in any way connected with, or arising out of, the conduct of volunteer activities or special events for, or on, the Chesapeake Arboretum grounds. The hold harmless agreement applies to any and all participants involved in the event.

In cases where a minor or incapacitated person is to participate in the required activities or special event, the signature of a parent or guardian is required.

In cases where the proposed activity or special event involves sales, fundraising, solicitations, charges for admission or fees for participation, a License Agreement shall be required in addition to this Activity Form.

I have read, understood, and hereby agree to the foregoing Hold Harmless provision:

_____ **Signature** _____ **Date** _____

_____ **Print Name** _____

Check One: **Individual** ___ **Group/Organization** ___ **Parent/Guardian** ___

If a group or organization, what the official name of the group _____

If a group or organization, what is your title? _____

If a parent/guardian, please print name of child(ren) or ward _____

Submit signed application to:

Or scan and email to:

**Chesapeake Arboretum
624 Oak Grove Road
(if submitting in person)**

**President@ChesArbor.org
or
Info@ChesArbor.org**

-----**ARBORETUM USE ONLY**-----

Date Received: _____

Date Presented to Board/Committee: _____

Action: _____ **Approved** _____ **Denied**

Continued for additional information: _____ **Continued for Board approval:** _____

Date of Final Approval or Denial: _____

If Approved, Name of Arboretum supervisor: _____

Board comments/stipulations: _____