

ADOPT-A-POST 2023 RESERVATION FORM



Mail this completed form, IPEP Volunteer Roster form, and payment to Rediscover Martinsville, P. O. Box 1123, Martinsville, IN 46151. You will be contacted by email about your assigned lamp post and be given further instructions. **Questions?** Please call Adopt-a-Post director Laura Elliott at 317-417-3626 or email laura.elliott@intelli-leap.com.

DEADLINE: Reservation form, IPEP Volunteer Roster form and payment **must be received by 9:00 p.m. on Tuesday, September 12th, 2023.** Note: This is not a postmark deadline. **This deadline will be strictly enforced, and the application will not be accepted without payment, Reservation Form, and IPEP Volunteer Roster.**

Participating Individual, Business, Group or Organization					Date
Contact Person		Cell Phone		E-Mail	REQUIRED
Complete Mailing Address					
Quantity Lamp Posts Requested		Total Due \$25 per lamp post		Total Paid	
Indicate what message you want on your sign. [] Use message from previous year [Six word limit]:					
Circle what you want the city sign to say: Merry Christmas or Happy Holidays					
For Rediscover Martinsville use only: Check or Money Order Check #: _____ Volunteer Roster Signed?: Y/ N					
Post #	Post #	Post #	Post #	Post #	Date paid Initials

Liability Waiver: Rediscover Martinsville, the City of Martinsville, Morgan County, the Greater Martinsville Chamber of Commerce and downtown business and property owners will not be responsible for injury or vandalism or loss of decorations. This is a community-spirited project for the benefit of the entire community. Decorations are expected to be family friendly and otherwise in good taste. By participating, you agree to behavior that is appropriate to the season of goodwill and generosity. Decorations deemed inappropriate will be removed. **Initial:** _____

Make Check or Money Order payable to: Rediscover Martinsville.

I realize that I need to decorate the post between Nov. 15th - Nov. 22rd, 2023. Initial: _____

Agreement: By signing below, I agree that I have read and understand the requirements and will follow them.

Name (print)

Date

Signature

Submission Check List: I have included:

Fully completed Reservation form Fully completed IPEP Volunteer Roster form Payment.

MAP of LAMP POSTS

		Sycamore St														
		54	55					66	67							
		53	56					65								
		52	57					64	68							
		51	58	59	60	61	62	63	69	70	71	72	73	CITY HALL		
		Jefferson St														
		33	92	93	94	95	96	97	79	78	77	76	75	74	LIBRARY	
		32	91	COURT HOUSE				98	80							
		31	90					99	81							
		30	89					82								
		29	88	87	86	85	84									
		28	Main St													
		26	25	24	16	15	14	13	12	5	4	3	2	1	POST OFFICE	
		23	17					11	6							
		22	18					10	7							
		21	19					9	8							
		20	20													
		Mulberry St														

Pike St

NORTH

Morgan St

Washington St

Jackson St

SOUTH