



PICK UP THE POCONOS GROUP SIGN-UP FORM

Thank you for your interest in participating in the **2023 Fall Pick Up the Poconos Clean Up on Saturday, September 23, 2023**. We look forward to having your group participate! Pick Up the Poconos Day runs from 9:30 a.m. to 12:30 p.m. (rain or shine) at various locations throughout Carbon, Monroe, Pike, and Wayne Counties.

Individual groups and organizations looking to participate do NOT need to sign up each individual participant through **PickUpThePoconos.com**. Rather, they should complete this form and submit it directly to **Jennifer Aquila, Education Relations Manager** of the PMVB. Jennifer will then coordinate directly with your group to ensure your team receives volunteer supplies and credit for participating.

If needed, the PMVB can provide supplies to your group. Volunteer Supply Kits typically include an adult size t-shirt, garbage bags, safety vests, and gloves. If you do not need the entire kit, the PMVB can provide specific supplies as needed. Please note that supplies availability may vary depending on inventory.

The deadline to sign up is **Tuesday, September 12, 2023 by 5:00 p.m.** To participate, you must complete the form below and agree to the Waiver and Release of all Claims on the last page of this packet. If you miss the deadline, don't worry! We can work with your group for the **Spring Clean Up** happening on **Saturday, April 20, 2024**.

Please help spread the word by sharing the event on Facebook.

Please return the completed form to **Jennifer Aquila** at jaquila@poconos.org
by **Tuesday, September 12, 2023 by 5:00 p.m.**

GENERAL INFORMATION

Group Name: _____

Primary Location Address: _____

County (Circle One): Carbon Monroe Wayne Pike

Number of volunteers in your group: _____

**If this number changes after submitting this form please reach out to Jennifer Aquila directly.*

Has your group participated in Pick Up the Poconos in the past? YES NO

How did you hear about Pick Up the Poconos? _____

Is your group affiliated with a school district, college, or university? YES NO

If yes, please specify:

GROUP CONTACT

First Name: _____ Last Name: _____

Email: _____

**By providing your email you consent to receive emails from the Pocono Mountains CVB. You can withdraw consent at any time.*

Phone Number: _____

**By providing your phone number you consent to receive text messages or phone calls from the Pocono Mountains CVB. You can withdraw consent at any time.*

PICK UP LOCATION INFORMATION

Does your group already have a primary pickup location in mind? YES NO

If yes, please specify: _____

If you do not have a location in mind, would you like the PMVB to help facilitate a cleanup location for you? YES NO



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Do you need any assistance from the PMVB to coordinate approval of this location with the township or borough? YES NO

Do you need assistance with post-cleanup trash removal? YES NO
**By selecting "NO" your group will be responsible for properly disposing of the collected trash after the cleanup.*

Will a member of your group be available to pick up the volunteer supplies by **Wednesday, April 19** from the **PMVB's Main Office (1004 West Main St. Stroudsburg, PA 18360)**?
YES NO

If no, please specify the best way to coordinate a pickup/drop off with your group:

Please check off any supplies your group is requesting:
**Please note that supplies availability may vary depending on inventory.
T-shirts are not available in children sizes at this time.

- Garbage Bags Safety Vests Gloves T-Shirts
- Drawstring Bag Trash Pickers/Grabbers
- I am requesting a Volunteer Supply Kit for each person.

Volunteer Supply Kits typically include an adult size t-shirt, garbage bags, safety vests, and gloves.



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WAIVER & RELEASE OF ALL CLAIMS

Please read this form carefully and be aware that in signing up and participating in this project you will be waiving and releasing all claims for injuries your group or organization might sustain arising out of this project.

As the Group Contact for this project, I recognize and acknowledge that there are certain risks of physical injury, and I agree to assume the full risk of any injuries, including death, damage or loss that I may sustain as a result of participating in any and all activities connected with or associated with such program.

I agree to waive and relinquish all claims my group may have as a result of participating in this project against Pocono Mountains Visitors Bureau, and its officers, agents, servants and employees, and all sponsors, partners, participating agencies, companies, and all other program participants and volunteers.

I do hereby fully release and discharge Pocono Mountains Visitors Bureau and its officers, agents, servants and employees, and all sponsors, partners, participating agencies, companies, and all other project participants and volunteers from any and all claims from injuries, including death, damage or loss which my group may have or which may accrued to my group on account of my participation in this project.

I further agree to indemnify and hold harmless and defend Pocono Mountains Visitors Bureau and its officers, agents, servants and employees, and all sponsors, partners, participating agencies, companies, and all other project participants and volunteers from any and all claims resulting from injuries, including death, damage and losses sustained by my group and arising out of, connected with, or in any way associated with the activities of this project.

Initial: _____

PHOTOGRAPHY/VIDEO DISCLAIMER

I understand that the photographs/videos taken of my group during Pick Up The Poconos can be used wholly or in part in any Pocono Mountains Visitors Bureau marketing aspects (PTN, PMM, digital marketing, etc.). I acknowledge that by initialing this form, I give up all claims of ownership of the photographs/videos, and assign copyright to the Pocono Mountains Visitors Bureau. No further payment will be due. Use of the photographs/videos may be granted to third parties, however the photographs/videos will remain the property of the Pocono Mountains Visitors Bureau.

Initial: _____



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