



The Highland Downtown Development Authority

Adopt-A-Garden Program 2026

Design Committee Chairperson: Cassie Blascyk blascyk@highlandtwp.org cell (248) 887-3791 x 138

Program Description: The Highland Downtown Development Authorities (HDDA) Adopt-A-Garden Program provides a way for members of the community to participate in the beautification and maintenance of our gardens and to enhance experience in Downtown Highland. The Adopt-A-Garden Program also helps us to strengthen ties with our community and bring fellow gardeners together towards a common goal.

Why Adopt-A-Garden? Volunteer gardeners can use their creativity and show off their gardening skills to the thousands of visitors who frequent or drive through our community during the summer months.

Who can adopt? Individuals (18+), Families, School/Community/Church Groups, Local Businesses

Program Expectations:

- Adopt-A-Garden volunteers are expected to commit to maintaining their designated flower garden for one garden season, from May through September. This includes a spring and fall clean-up and regular monthly maintenance. *The DDA will provide flowers, mulch, trash bags, watering and fertilizer for the spring and fall clean-up dates.* Monthly maintenance includes weeding, and litter removal.
- For volunteer groups, designate a group supervisor who will be the primary contact person. The group supervisor will also ensure that volunteers sign a waiver of liability form before any work is done.
- Flower gardens are adopted on a first-come, first-serve basis. A list of all the adoptable flower gardens is included in this packet. The DDA design committee will do its best to match volunteers to the flower bed that they are most interested in.
- All volunteers under age 18 must be supervised by a responsible adult.
- The Highland DDA will install a sign with the volunteer name(s) on it to be placed in their adopted flower bed as recognition for their time, effort, and dedication to keeping Highland gardens looking beautiful. Signs will be placed after groups have completed the spring clean-up.

How to Sign Up

- Complete and sign the application form and return it to The Highland DDA, 205 West Livingston Road, Highland, MI 48357 or email Cassie Blascyk at blascykc@highlandtwp.org
- Design committee volunteers will review the application and match you to a flower bed available for adoption.
- Following approval, each volunteer must sign a liability form before any work is done. Volunteers under 18 must have their liability form signed by a parent or legal guardian. A copy of the liability form is attached.
- **Volunteers should schedule the spring and fall clean-up dates at least three days in advance with Cassie Blascyk to coordinate delivery of needed materials and supplies.**

Safety Guidelines

- Wear work gloves, closed-toed shoes, and light-colored clothing. Volunteer t-shirts are available upon request.
- Bring sunscreen and apply it regularly to prevent sunburn. Hats and sunglasses are also recommended.
- Beware of bees, poison ivy, poison oak, and other irritants. Avoid bites by wearing insect repellent.
- Do not overexert yourself: take breaks and drink plenty of liquids. Be sure to bring water with you, as not all parks have water available.
- Work during daylight hours.
- Do not use or bring your own power tools and motor-driven equipment unless you have been pre authorized.
- Postpone or stop clean-up immediately if rain, lightning, or strong winds are present.
- Leave dead animals on site and report them to the DDA
- Do not bring pets, or leave pets in the car, while you volunteer in the gardens.

Flower Beds Available for Adoption



1 SOUTHWEST CORNER OF RUGGLES RD & N MILFORD RD

2 NORTHWEST CORNER OF LIVINGSTON RD & N MILFORD RD

3 SOUTHWEST SIDE OF N MILFORD ROAD, SOUTH OF LIVINGSTON RD

4 NORTHWEST CORNER OF N MILFORD RD & MCPHERSON ST

5 SOUTH WEST CORNER OF N MILFORD RD & MCPHERSON ST

6 SOUTHEAST CORNER OF N MILFORD RD & LIVINGSTON RD

7 SOUTHWEST CORNER OF LIVINGSTON RD & S SAINT JOHN RD

8 NORTHEAST CORNER OF S SAINT JOHN RD & LIVINGSTON RD

9 NORTHWEST CORNER OF LIVINGSTON RD & S SAINT JOHN RD

10 NORTH LIVINGSTON RD BETWEEN N MILFORD RD & S SAINT JOHN RD

11 NORTHEAST CORNER OF N MILFORD RD & LIVINGSTON RD

12 SOUTH EAST CORNER OF S. SAINT JOHN AND E. LIVINGSTON

Adopt-A-Garden Program Application Form 2026

Please complete and return to Cassie Blascyk blascyk@highlandtwp.org or drop it off at the Township Office located at 205 N. John Street, Highland, MI 48357

Contact Information

Volunteer Name(s): _____

Group/Business Name (If Applicable): _____

Group Supervisor/Primary Contact (If Applicable): _____

Mailing Address: _____

Phone Number: _____ Email Address: _____

Preferred Flower Garden Please write your top three choices from the list of adoptable flower gardens:

Choice 1: _____

Choice 2: _____

Choice 3: _____

Additional Information Estimated Number of Volunteers Participating: _____

Name as it would appear on your recognition sign: _____

Statement of Agreement

I have read and agree to abide by the expectations and safety guidelines included with this form with the Highland DDA Adopt-A-Garden Program. I understand that this is an application and the Highland DDA Design Committee will contact me to finalize an agreement. In addition, I understand that the Highland DDA Design Committee will make the final determination as to whether a group can participate and the final garden assignment. I understand that failure to uphold these guidelines and expectations will jeopardize my group's involvement in the Adopt-A-Garden Program in the future.

Applicant (Primary Contact) Signature _____

Date Signed _____

Volunteer/Community Service Waiver Form Volunteering or performing community service for the Highland DDA is a rewarding job, but it is not without risks. While we strive to make a safe environment for all our guests, we ask that you observe our rules of safety at all times. By signing, you agree that you are volunteering or providing community service on your own behalf and release the Highland DDA, its employees, agents, and board members from any and all claims, injuries, or actions (including those of active or passive negligence) arising from any activities in which you participate for the Highland DDA. By signing, you understand the risks and hazards, and assume all risks of loss, damage, or injury, including death, that may be sustained while performing activities for us at one of its events or functions. By signing, you represent that you are 18 years of age and of sound mind. If you are under 18, a parent or legal guardian must sign this form as well. Anyone under 18 must be accompanied by an adult at all times.

Signature: _____

Printed Name: _____

Date _____

Phone Number _____

Complete Mailing Address _____

IN CASE OF EMERGENCY, CONTACT: _____

Emergency Contact Phone Number: _____

IF VOLUNTEER/CIVIC WORKER IS UNDER 18 YEARS OF AGE:

Signature of Parent or Legal Guardian _____

Printed Name _____

Date _____

CHARTER TOWNSHIP OF HIGHLAND

205 North John Street Highland, MI 48357

Hold Harmless Agreement

To the fullest extent permitted by law, _____ agrees to defend, pay on behalf of, indemnify, and hold harmless the Charter Township of Highland, the Highland Downtown Development Authority and its elected and appointed officials, employees and volunteers, and others working on behalf of the Charter Township of Highland and Highland Downtown Development Authority against any and all claims, demands, suits, or loss, including all costs connected therewith, and for any damages which may be asserted, claimed, or recovered against or from the Charter Township of Highland and Highland Downtown Development Authority by reason of personal injury, including bodily injury or death and/or property damage, including loss of use thereof, which arises out of or is in any way connected or associated with The Highland Downtown Development Authority's Adopt-A-Garden Program.

Printed
Name: _____ Date: _____

Signature _____

Township Official _____

Date: _____

Signature: _____

IF VOLUNTEER/CIVIC WORKER IS UNDER 18 YEARS OF AGE:

Signature of Parent or Legal
Guardian _____

Printed Name: _____ Date: _____