

## METRO TRANSIT ADOPT-A-STOP PROGRAM RENEWAL AGREEMENT

| By signing this renewal agreement, I agree to adhere to the terms of the original signed agreement. |  |
|---|--|
| The previous agreement, originally signed on, applies to stop(s):                                   |  |
|   |  |
| Latest agreement signed:  | and was valid until                                      |
| Is renewed as of (today's date)   | valid until (1 year from today's date)                   |
| If your address and/or email, phone numupdated information below.                                   | nber, or emergency contacts have changed, please provide |
| Name of Adopter/Volunteer:  |  |
| Address:  |  |
| Phone Number:   |  |
| Email:  |  |
| Emergency:  |  |
| Anything else we should know?   |  |
|   |  |
| Adopter/Volunteer Signature:  |  |
|   | Date:  |
| Metro Transit Signature:  |  |
|   | Date:  |