

# Adopt-A-Highway Program Application

## Idaho Transportation Department



### Sign Information

1. Complete the boxes as you request your signs to be written. No slogans or logos. Indicate a space by leaving a blank box.
2. Signs shall be limited to one or two lines wherever possible. Use of a third line will require ITD approval.
3. Signs with one or two lines of text will display up to 15 characters, including spaces. Signs with three lines of text will display up to 20 characters, including spaces.

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**Contact Information** – Schools or school affiliated organizations must provide a school faculty member as the contact person or alternative representative. Applications received from organizations, schools or school affiliated organizations without this contact information will not be approved and will be returned to the applicant.

Contact Name – Print	Day Phone	Extension	E-mail Address			
Mailing Address			City		State	Zip Code

**Alternative Representative Information** – Required for all organizations.

Alternate Name – Print	Day Phone	Extension	E-mail Address			
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**Total number of participants in group** \_\_\_\_\_ **Number under 18** \_\_\_\_\_

**Highway Section You are Interested in Adopting** – Show highway number, beginning and ending milepost, and other information that will help identify the location.

Signature	Date
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**-- ITD Use Only --**

Approved Section	Beginning Milepost	Ending Milepost
Segment Number	County	Foreman Area
Notes:		

**Mail completed form to:**