

Haverstraw Community Garden - Gardener Registration Form 2015

Please Print Clearly

Primary Gardener: _____
Last Name First Name Middle Initial

Home Address: _____
Number and Street Name Apt. # City/Town Zip Code

Phone #: (H) _____ (C) _____ Email: _____
* REQUIRED

Garden Partner*: _____
*Required Last Name First Name Middle Initial

Phone #: (H) _____ (C) _____ Email: _____
* REQUIRED

This section to be completed by Primary Gardener:

- Check here to show that you agree to follow the Garden Guidelines (see attached for full list) including:
 - Keep my plot weeded and tended
 - Abide by decisions made collectively by the gardeners who participate in coordinating the garden
 - Follow land use and parking rules
 - Clear my plot at the end of the gardening season
- Check here if you **do not** have gardening experience
- Check here if you would like a more experienced gardener to help you get started & answer your questions.
- Check here if you are an experienced gardener.
- Check here if you are an experienced gardener and would like to assist a new gardener.
- Check here if you agree to let photographs of you taken in the garden to be a part of publicity materials.
*(If you do **not** want to be in published photos, please let any photographer you see at your garden know that.)*
- Check here if your phone number & email can be included on a list to be shared with your fellow gardeners.
- I agree to hold the Village of Haverstraw, North Rockland Central School District, Haverstraw Middle School, and lease holders of garden, and their agents and employees, harmless from any and all liability for bodily harm, damage, or loss of any kind or nature arising from, or in any manner connected with, my participation in the Haverstraw Community Garden at Haverstraw Middle School.
- I agree to attend the Gardener's Welcome event at the community garden on a **date to be announced** to get the key, begin working my garden plot, meet fellow gardeners, and answer questions you may have.

Signature required: (Primary Gardener) _____
Name Date

Each plot is approximately 5 X 15 feet. Gardener's should expect to spend 2-5 hours per week tending to their plot (watering and weeding). Garden plots will be assigned on a **first come first serve basis**. A registration form and deposit of \$30 is required to reserve a plot. Should you lose the fence/shed key, a fee of \$5 will be deducted from your deposit.

I am paying by: Cash Check Money order

Please make your check out to "The Village of Haverstraw." Be sure the Primary Gardener's name is on the check.

Submit this completed garden application with deposit in person or mail to:

Haverstraw Community Garden Attn: Peggy Koval
The Haverstraw Center
50 West Broad Street
Haverstraw, NY 10927