

The following application is for your membership to the Community Gardens of Hancock County.

FEES: Please note that the Community Gardens has adopted a participation fee of \$20 with partial refund at the end of the season. **The fee is waived for those who are receiving any type of assistance.**

To ensure a plot in the gardens, please return this application to: Heather Heilman, C/O United Way of Hancock County, 245 Stanford Parkway, Findlay, OH 45840 April 15. Plots are issued on a first come, first-served basis with preference given to those on assistance.

Name (Individual/Family/Agency) _____

Names of those who will be participating in your garden:

Address _____

City _____ St _____ Zip _____

Phone _____ Email _____

Adults in Family _____ # Children in Family _____

Hobbies or activities:

Gardening interests and/or goals:

Are you currently receiving any of the following: SNAP (food assistance), WIC, Ohio Medical Benefits, Child Care Assistance, Home Energy Assistance, Free/Reduced Meals, Prescription (Rx) Assistance,

Yes No

Have you been a member of the Community Garden of Hancock County?

Yes No

If you have been a Community Garden member in the past and would like the opportunity to remain at the same plot (where possible) please indicate the plot number. _____

Do you have limited gardening experience or are you new to gardening. Yes No

Please indicate which plot size you would prefer. If you are new to gardening, it is **strongly suggested** that you select a smaller plot size.

10' x 10' 10' x 20' 10' x 40'

Garden preparation, planting and maintenance (weeding, watering) takes time. At least an additional five hours and up to 10 hours per week can be expected to cultivate a garden. Please indicate that you are able to accommodate this type of commitment.

Yes. I have time. I am unsure

The Community Gardens of Hancock County is run by volunteers. All gardeners who are assigned a plot may be called on to give back of their own time to ensure the gardens are well-maintained. Please indicate that you are willing to give back at least 2 hours of your time during the 2019 gardening season.

Yes. I will volunteer at least two hours. No. I am unable to volunteer.

Will you be planting corn in your garden? Yes No

GARDENING AGREEMENT:

If I am accepted for the Community Gardens of Hancock County (**CGHC**) project, I agree to:

- Pay the participation fee of \$20. (Keep in mind that a refund of 50% of your deposit fee will be given at the end of the season for those who remain and clean up their plot by October 20,, 2019)
- Attend one of the **CGHC** orientation meetings. Date and location TBD. If I cannot attend, I will arrange a meeting with the garden coordinator. Fees can be paid at this time and checks made out to *Halt Hunger Initiative c/o UWHC* – memo CGHC or community gardens.
- Abide by the **CGHC** Guidelines.
- Keep my plot and the pathways adjacent to it well- maintained.
- Plant only plants approved by the **CGHC**. Invasive perennials (mint, horseradish, etc.) are not allowed.
- Notify the garden coordinator immediately if I cannot maintain my plot for any reason during the growing season.
- Begin gardening in my **CGHC** plot only after plots have been officially assigned and staked out and opening day announced. (Late April or Early May)
- Clear my **CGHC** plot of all non-organic materials (fencing, string, wire, stakes, cages, plastic, etc.) and remove all large or woody plant debris to the specified area no later than **October 20, 2019**. I understand that if my **CGHC** plot is left in a condition unsuitable for plowing I may forfeit the right to garden with the **CGHC** in the future and partial refund.
- Observe any site specific guidelines established by the garden coordinator/steward.
- Accept that the **CGHC** project or its organizers/funders assume no liability for personal injury or property damage in the gardens.

Signature _____ Date & Time _____

