

Mason Community Garden Community Gardener Application & Release

Gardener name: _____ Phone: _____

Gardening partner: _____ Phone: _____

Gardener address: _____

Gardener email: _____ Partner email: _____

Are you applying for an individual garden plot? **Yes / No**

Which plot size do you prefer? ___ 15' x 15' **OR** ___ 7.5' x 15' **OR** ___ 8' x 4' raised bed?

Returning gardeners have the same plot assignment, unless otherwise requested.

Do you want your plot tilled? **Yes / No**

Are you interested in helping with the community donation garden plot? **Yes / No**

The community garden plot is where individuals volunteer their time to grow produce to donate to local food banks.

Photography: From time to time, gardeners, garden leaders and the media will take photos of the garden. As a participant in the Mason Community Garden, you may appear in printed or published photographs.

Contact: All gardeners are required to share their email address and phone number with members of the community garden.

Monies enclosed: \$ _____ Application fee for individual garden plot (\$20.00)

\$ _____ Donation for Mason Community Garden
(Please consider a donation of \$10 or more!)

\$ _____ **Total amount enclosed**

Please make checks payable to Mason Community Services; be sure to note the payment is for your Mason Community Garden plot in the memo field, plus any additional donation information.

If water use exceeds the amount collected for plot registration, a small additional fee may be requested.

By signing below, I agree that I have read and understand the Application and the Community Garden Guidelines (see reverse side) and agree to abide by all of the rules established therein. I understand that neither the garden leaders, Mason Community Services, nor the City of Mason are responsible for the actions of any gardeners or their guests, even if the actions result from a failure to enforce the Community Garden Guidelines or park rules. Neither the garden leaders, Mason Community Services, nor the City of Mason make any warranties as to the fitness of any particular produce for consumption and are not responsible for any injuries or damages related to gardening or the consumption of the produce. I agree to follow and abide by the Garden Appeal Process to resolve any issues.

I therefore agree to release and hold harmless Mason Community Services and the City of Mason, their insurers, and their elected officials and appointed officers, agents, employees, volunteers, successors and representatives of any kind for any liability, damage, loss or claim that occurs in connection with use of the garden by me or my guests.

Signature _____ Date _____

Mail Application with Fee to: Mason Community Services, 118 W. Oak St., Suite 103, Mason MI 48854