

**2015 Sheboygan Avenue Community Garden Registration**

1. Gardener: \_\_\_\_\_  
Last Name First Name Middle Initial

2. Gardening Partner: \_\_\_\_\_  
Last Name First Name Middle Initial

3. Gardener #1 Address: \_\_\_\_\_  
Number and Street Name Apt. # City/Town Zip Code

4. Phone numbers: \_\_\_\_\_

Gardener's e-mail: \_\_\_\_\_ Partner's e-mail: \_\_\_\_\_

5. Do you have a plot at another garden in Madison? \_\_\_\_ If so, where?  
\_\_\_\_\_

6. What languages do you speak at home?  
English \_\_\_\_ Hmong \_\_\_\_ Spanish \_\_\_\_ Lao \_\_\_\_ Russian \_\_\_\_ Khmer \_\_\_\_ Other \_\_\_\_

7.  Please check here to show that you agree to do the following:  
 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

8. Do you want a more experienced gardener to help you get started & answer your questions?  yes  
If you are an experienced gardener, could you help a new gardener and answer their questions?  yes

9. Photo permission: staff, volunteers and the news media sometimes take photos at the gardens. Please check here if you agree to let your photo 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.)

10. Phone and Email: All gardeners have to share their phone numbers with the volunteer coordinators at their garden. Some gardens also circulate a public phone list. Please check here if your **phone number and email can be included** on a phone list to be shared with your fellow gardeners.

11. Personal responsibility: I agree to hold WI Department of Administration, City of Madison, lease holders of gardens 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 this community garden. Check here.

Signed: (Gardener responsible for plot) \_\_\_\_\_  
Name Date

12. Plot rental fees are on a sliding scale according to family size and income. Please check the fee chart for your rate. Note that the fee chart is based on a 400 square foot plot; adjust your payment relative to the size of your plot (200 sq ft plot= half the fee, etc.). See cover letter instructions for determining your plot size. *Raised bed plots are \$10 per raised bed structure.*

**Circle your plot size: 100 sq ft    200 sq ft    400 sq ft    Raised bed**

Please write the amount you owe for your plot, according to sliding scale fee structure, \$ \_\_\_\_\_  
*Optional -- Hay/Straw: Number of Bales \_\_\_\_\_ x \$4.00 per bale = \$ \_\_\_\_\_*

**Grand Total for Plot Fee & Hay/Straw \$ \_\_\_\_\_** I am paying by:  Cash     Check     Money order

13. Gardeners handbook. Electronic copies of the handbook will be sent to all gardeners with an email address. If you would like a paper copy of the handbook, please check here.

Who filled out this application, if it was not the gardener? \_\_\_\_\_ Phone \_\_\_\_\_

Please make your check out to "Sheboygan Avenue Community Garden." Be sure the gardener's name is on the check.

Send this registration form, fee payment, and demographic form to:

Sheboygan Community Garden, PO Box 5011, Madison, WI 53705

**Due by March 13, 2015**