Coal Country Community Garden
Application Form
2020

Name _____ Date: _____

Mailing Address _____

Email _____ Phone _____

Are you applying for a plot as:

_____ single parent family
_____ senior citizen
_____ limited mobility
_____ two parent
_____ youth
_____ 4-H
_____ low income

Available plots: I request the following size plot:

_____	½ plot	200 square feet	($15.00)
_____	Full pot	400 square feet	($25.00)
_____	Raised bed	20 to 30 square feet	($10.00)

Plots awarded first come first serve basis

Payments must accompany applications. Make checks payable to:
Coal Country Community Garden

Second plot: If space is available, requests for additional plots will be considered. Please check below if you would be interested in an additional plot. Same pricing as above.

_____ ½ plot
_____ Full plot
_____ Raised bed

Plots will be awarded by May 20, 2020.

YOU WILL BE RESPONSIBLE FOR TILLING YOUR PLOT.
IF YOU'D LIKE THE GARDEN COMMITTEE TO TILL FOR YOU THERE WILL BE A 10.00 CHARGE

_____ I WOULD LIKE THE COMMITTEE TO TILL FOR ME

Can we contact you via text message? YES NO

All applicants: I hereby agree, for me and all those in my plot, to pay the appropriate fee, sign an AGREEMENT, and abide by the rules of the 2018 Community Garden. In signing this, I am stating that I am prepared to meet the physical demands of gardening in the Community Garden i.e., maintenance, group workdays, meeting and responsibilities to my fellow gardeners.

_____ _____

Signature Date

PLEASE RETURN APPLICATIONS TO THE WRIGHT TOWN HALL ON OR BEFORE MAY 15, 2020.

Any questions: aziegenhorn@yahoo.com
307 696 5604

Drop off completed applications and money to Wright Town Hall. You can put in the drop box in front.

COAL COUNTRY COMMUNITY GARDEN

-PLANTING SEEDS OF HOPE AND CULTIVATING COMMUNITY-

UNIVERSITY of WYOMING EXTENSION | master gardener

2020 COMMUNITY GARDEN AGREEMENT

If accepted into the 2020 Community Garden project, I agree to the following terms:

1. I understand that I am responsible for planning, planting, harvesting, and all other phases of gardening, **including weeding**. I agree to work cooperatively with the garden board, staff and other plot holders for a successful garden.

2. I will have my plot substantially planted by June 15th or I will lose my plot. I will attend the initial group meeting, clean up days and the group meetings as scheduled by the Community Garden Board.

3. I will keep my address, phone number and email current with the Community Garden Board.

4. I will notify Garden board immediately if I must abandon my plot during the growing season, regardless of the reason. I understand the Community Garden Board will reassign and clean out the plot as they see fit.

5. I agree to maintain my plot and surrounding common areas by keeping it watered, neat, weed free, and pest free as much as is reasonably needed.

6. I will notify the Garden Board if I see or have any problems with the garden. Open communication is the key to a Community Garden.

7. I will not hold liable the Campbell County Master Gardeners, University of Wyoming Extension Office, Campbell County, Town of Wright and its employees or any person associated with the Community Garden for any accident, injury or loss that may occur at the garden site.

8. I will clear my plot of corn stalks, all plant debris and all non organic materials (wire, string, stakes, rocks, plastic, etc.) by the designated deadline. If this is a difficulty, I will ask the garden board to arrange for help. This is for the purpose of tilling in the fall. I understand any gardeners who do not clear plots may lose their gardening privileges.

9. I understand I am responsible for the cleaning and return all equipment that I have removed from the shed. Tools are only to be used at the garden.

10. Any use of chemical pesticides or herbicides will be cause for immediate expulsion from the garden. Only approved organic pesticides can be used.

I have read, understood, and agree to abide by the Community Garden rules and regulations.

Printed Name _____

Email _____

Mailing address _____

Phone _____

Signature _____ Date _____