

2011 Westminster Community Garden Registration

1. Gardener: _____
Last Name First Name Middle Initial

2. Gardening Partner: _____
Last Name First Name Middle Initial

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

4. Phone numbers: _____

Gardener's e-mail: _____ Garden Partner's e-mail: _____

5. Did you have a plot at this garden last year? _____

6. 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 garden rules and guidelines
- Clear my plot at the end of the gardening season

7. 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

8. Photo permission: Westminster 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.)*

9. Phone and Email: All Westminster gardeners have to share their phone numbers with the City of Westminster. Please check here if your **phone number and email can be included** on a phone list to be shared with your fellow gardeners.

10. Personal responsibility: I agree to hold the City of Westminster, and lease holders of Westminster 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 a Westminster affiliated garden. Check here.

Signed: (Gardener responsible for plot) _____
Name Date

Return completed application form and signed rules contract to:

Department of Planning
56 West Main Street
First Floor
Westminster, MD 21157