



## LENOX COMMUNITY GARDEN APPLICATION

I am:

A new community garden member\_\_\_\_

Renewing my community garden membership\_\_\_\_

Name\_\_\_\_\_

Date \_\_\_\_\_

Address (of Lenox residence or Lenox place of work)

\_\_\_\_\_

City\_\_\_\_\_ Zip \_\_\_\_\_

Phone (home)\_\_\_\_\_ (work) \_\_\_\_\_

Email\_\_\_\_\_

**A plot fee of \$10 is required before the plot can be assigned.** This fee will go toward expenses of the community garden (water bills, plant/seed purchases, community tools, etc.).

**As part of your membership, there is a requirement to volunteer during the season for a minimum of 6 Hours.**

**\_\_Site Maintenance    \_\_Mulching    \_\_Path Maintenance    \_\_Composting**

**Each gardener is expected to help during the season with general chores.**

I have read the Community Garden Rules and understand that failure to meet the guidelines will result in loss of cleanup deposit fees and gardening privileges.

Signature\_\_\_\_\_

Date\_\_\_\_\_

## Release of All Claims

*The following form is intended as a guide only; be sure that the final agreement you use meets the needs and details of your group.*

### Release of All Claims

I, \_\_\_\_\_, am a

participant in the Lenox Community Garden at Lilac Park. As a condition of being allowed to participate in the Community Garden, I agree to the following:

**1.** I am duly aware of the risks and hazards that may arise through participation in the Community Garden, and assume any expenses and liabilities I incur in the event of an accident, illness or other incapacity. If I have had any questions about the Community Garden, its nature, risks or hazards, I have contacted the garden coordinator and discussed those questions with him or her to my satisfaction.

**2.** In consideration of being granted the opportunity to participate in the Community Garden, I, for myself, my executors, administrators, agents and assigns do hereby release and forever discharge the Garden Committee, Garden Coordinator, volunteers, other gardeners, and the cooperating landowner from all claims of damages, demands, and any actions whatsoever, including those based on negligence, in any manner arising out of my participation in this activity. I understand that this Release means that, among other things, I am giving up my right to sue for any such losses, damages, injury or costs that I may incur.

I represent and certify that my true age is either 18 years old or, if I am under 18 years old on this date, my parent or legal guardian has read and signed this form. I have read this entire Release, fully understand it, and I agree to be legally bound by it.

Participant's Signature \_\_\_\_\_

Printed Name \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian's Signature \_\_\_\_\_

Printed Name \_\_\_\_\_ Date \_\_\_\_\_