

Leland Community Garden

Application Form

Primary Gardener Name: _____ Date: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Number: (____) _____ Cell Number: (____) _____

E-mail: _____

Type of Plot: _____ Individual _____ Communal

Size of plot (Individual Only): _____ 10' x 20' _____ 10' x 10' _____ 4' x 10'

Desired Growing Seasons: _____ Spring/Summer _____ Fall/Winter

Other person(s) allowed to garden plot:

Name: _____

Address (If different from above): _____

Name: _____

Address (If different from above): _____

Name: _____

Address (If different from above): _____

(Continue to Back)

Community Garden Waiver and Release for Participants

READ CAREFULLY BEFORE SIGNING

Important Notice: Participation in this Program is at each participant's own risk. Any and all claims for injury or damage against the Town of Leland are hereby waived and released as a condition to participation. Even if a waiver and release is not signed, by participating, the participant (and invited guests) agrees to assume all risk and to hold the Town of Leland completely harmless therefrom. No security is provided at the Community Garden or within the Program area. Parents are responsible for the safety of their children at all times.

I agree to waive, release, absolve, hold harmless, defend and indemnify the Town of Leland, and their officers, agents, employees and volunteers from and against all damages, claims, demands, suits, or actions resulting from my occupancy or use of the Community Garden property. Damages waived may include, but are not limited to, damage or loss of property or physical injury or death to me or to any other person. I assume all risks and hazards for myself and for any minor children with me incidental to the conduct of this activity, including but not limited to the risk of physical injury. I understand there is no insurance coverage provided by the Town for this activity. Any insurance is my personal responsibility. I agree to act in a safe, prudent and responsible manner at all times while using the Community Garden. I agree to be respectful of other people using the Community Garden and of their property.

Signature _____

(Parent or guardian signature needed for minor or ward)

Date _____