



garden application

imagine community gardens

part one: identification

Name: _____ Pod Leader: Yes No

Street Address: _____

City: _____ State: _____ Zip: _____ Primary Language: English Spanish

Home Phone: _____ Cell: _____ Other: _____

Email Address: _____ Dialect: _____

Please list below all the people who live in your household.

Names	Age	Gender (M/F)	Will garden? (Y/N)	Has gardening experience (Y/N)

part two: agreement

I (We) attend church weekly monthly seldom I (we) do not attend church

I (We) attend church at: _____ My (Our) pastor is: _____

I (we) understand all the rules and regulations and have received a detailed copy of them. I promise to follow the rules and regulations that will help everyone have an enjoyable and productive garden. Failure to comply with the rules and regulations may result in the loss of my garden plot as well as future gardening privileges.

I (we) understand that Imagine Community Gardens is responsible for the safety or success of the participants.

I (we) agree to hold harmless the Imagine Community Gardens for any liability, damage or loss, or claim that occurs in connection with the use of the garden by me or any of my guests.

Signature of Gardener: _____ Date: _____

Photo Release: _____

I hereby give permission to Imagine Community Gardens, or its agents, the right to photograph or video record me and all members of my family and to use the photos or video in print or digital promotions of Imagine Community Gardens.

Signature of Gardener: _____ Date: _____



WAIVER AND RELEASE OF LIABILITY

I, _____, on my behalf or being the parent or lawful guardian of _____, in consideration of my/his/her participation in the Community Garden Project administered and sponsored by Imagine Community Gardens, Inc. do hereby, on my behalf or on behalf of my minor child, release and forever discharge Imagine Community Gardens, Inc. its officers, directors, agents, employees, shareholders and assigns from any and all loss of time, pain and suffering or property damage arising out of or occurring in connection with my or my minor child's participation in the Community Garden Project being administered/sponsored by Imagine Community Gardens, Inc.

I recognize and acknowledge that my or my minor child's participation in the program is solely at my/his/her/our own risk. I acknowledge that my or my minor child's participation in the program may expose me/him/her to risk of injury. I further understand that this Waiver and Release is absolute as to all claims, demands, causes or actions, suits, damages, costs and expenses which may arise as a result of the injury or demise of me or my child or as a result of any property damage which could occur while I/he/she is participating in this program except those claims or demands arising from acts of gross negligence of the employees thereof.

I further agree on behalf of me or my child, to abide by all the rules and regulations as hereinafter amended or supplemented, established by Imagine Community Gardens, Inc. applicable to the authorized use of the Premises, and agree that my or my minor child's use of the Premises may be canceled at any time, without prior notice or warning and that I/he/she disclaim any recourse in the event of such cancellation and agree to immediately vacate the Premises upon request.

I HAVE READ AND FULLY UNDERSTAND THIS DOCUMENT, INCLUDING THE FACT THAT I AM RELEASING AND WAIVING CERTAIN POTENTIAL RIGHTS HELD BY ME AND MY MINOR CHILD, AND VOLUNTARILY AND FREELY AGREE TO THE TERMS AND CONDITIONS SET FORTH.

SIGNED THIS _____ DAY OF _____,

Parent and/or Lawful Guardian