



Project GROW Community Gardener Application

Gardener Name		Gardening Partner	
Gardener Address			
Gardener Phone		Email	
Partner Phone		Email	
Plot Number Preference			

I qualify for government assistance (SNAP or WIC). Yes No

I would be willing to volunteer at the Project GROW Community Garden to assist as needed? Yes No

If you are a new gardener, would you like an experienced gardener to help you? Yes No

If you are an experienced gardener, would you like to help a new gardener? Yes No

Preferred plot tillage No-till plot Tilled plot

I would like permission to use the following insecticides or herbicides on my garden plot.

A water use fee of **\$20.00** is required at the time of application made payable to the **City of York**.

A cleanup deposit of **\$50.00**, made payable to the **UBBNRD**, is required before the plot can be assigned. The clean-up deposit will only be deposited if you do not remove plant materials and do not clean your plot.

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

Gardener Signature _____ Date _____

Return to: Upper Big Blue Natural Resources District
319 East 25th Street, York NE 68467
Phone (402) 362-6601; Fax (402) 362-1849
Questions ask Valerie Paul or Email, vpaul@upperbigblue.org