



GARDENER APPLICATION

Upper Big Blue Natural Resources District
319 East 25th Street, York NE 68467
Phone (402) 362-6601; Fax (402) 362-1849
Email: dleininger@upperbigblue.org

Project GROW Community Gardener Application

Gardener Name _____ Gardening Partner _____

Gardener Address _____

Gardener Phone _____ Email _____

Partner Phone _____ Email _____

A water use fee of \$20.00 is required at 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 be returned in the fall after you have removed all your plant materials and cleaned your plot.

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 (please circle one): No-till plot OR Tilled plot

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