

Rotary Community Garden of Bonita Springs Plot Application

If accepted as a gardener, I will abide by the following rules, terms and conditions:

I understand the annual fee for a garden plot is \$50 and if I receive a garden plot, I agree to pay this fee no later than September 10th. I understand there are only 13 plots available, that this application does not guarantee me a garden plot and that I will be notified if I have received use of a plot for the upcoming one year period. If I am awarded a plot, I will make every effort to attend the ground breaking and awarded plots announcement event on September 7th, 2013 at 10am.

I confirm I am a City of Bonita Springs Resident (copy of a current utility bill under the name of the applicant must accompany application).

Once I have been assigned a bed, I promise to devote reasonable amounts of time to its maintenance and improvement throughout the year.

During the year, my bed will not be left uncultivated (fallow or untended) for any period longer than 2 weeks. In the event of my absence, I will make arrangements with someone to take care of my bed and alert the garden leadership.

I will keep my plants within the limits of my garden bed and will not allow any plants to grow more than six feet high from ground level. I will keep my bed and a two foot area around my bed free of weeds, pests and diseases. If a bed has diseased, dead or infested plants, I will remove them. If I do not remove them, I understand a Garden Committee representative may remove them without notice.

I will keep paths and surrounding areas clean and neat, and will put trash only in the areas designated. Anything I bring from my home I will take back home. I will not bring household trash and leave it in the Community Garden.

I will plant only authorized plants included in the approved Community Garden Plants list. I will not plant any citrus or illegal plants.

I will not smoke, drink alcoholic beverages or use illegal drugs in the garden. I will not come to the garden under the influence of alcohol or illegal drugs. I will not bring weapons, pets or other animals to the garden.

Guests and visitors, including children, may enter the garden only if I accompany them. They must follow all rules, terms and conditions stated herein. I will supervise my children at all times when they are in the garden. I am solely responsible for the behavior of my guests.

I will not use fertilizers, insecticides or weed repellents that will in any way affect other plots.

I agree to volunteer hours toward community gardening efforts. I will attend regular garden meetings as able. If unable to attend, I will commit to keeping myself informed about the following topics: soil preparation and maintenance, watering the vegetable garden and pest and disease control.

I understand that I am responsible for the watering of my garden and will water my bed using the provided hoses.

I will not take food or plants from other gardeners' beds. I will respect other gardeners and I will not use abusive or profane language or discriminate against others. I will not engage in argumentative, confrontational or aggressive behavior with others in the garden.

I will work to keep the garden a happy, secure and enjoyable place where all participants can garden and socialize peacefully in a neighborly manner.

I understand that neither the Rotary Community Garden group nor owners of the land (YMCA of Bonita Springs), the Rotary Club of Bonita Springs Noon or the Rotary Club of Bonita Springs are responsible for my actions. I THEREFORE AGREE TO HOLD HARMLESS ANY MEMBER OF THE GARDEN COMMITTEE , THE YMCA OF BONITA SPRINGS, THE ROTARY CLUB OF BONITA SPRINGS NOON AND THE ROTARY CLUB OF BONITA SPRINGS FOR ANY LIABILITY, DAMAGE, LOSS OR CLAIM THAT OCCURS IN CONNECTION WITH USE OF THE GARDEN BY ME OR ANY OF MY GUESTS.

Commitment: I have read and fully understand the application and accept these rules, terms and conditions stated above for the participation in the Rotary Community Garden of Bonita Springs.

Signature _____ Date _____

Home address: _____

City: _____ State _____ Zip _____

Cell Phone _____ Home Phone _____

Email: _____

Approved by: _____

Bed# _____

Date: _____

Return this application no later than September 1, 2013 via email to:
mshallies@adsource.us or fax to: 239-495-0088.