

Registration Form

To be completed by all gardeners for the _____ season

This information will only be shared with the Communications Team

Name: _____

Address: _____

Phone: _____

Home: _____ Work: _____

E-mail: _____

Preferred method of contact: _____

Assigned garden plot #: _____

All gardeners and those on the waiting list are required to participate in at least one Team:
(please indicate your preference - first – second – third – choice, as well, if you want to join a second team)

Task Groups: Grass Cutting ___ Compost ___ Maintenance ___ Edible Landscape Garden ___
Watering ___

If you have been a member of the garden for more that one year, you may also join one of the Core Groups, or be a Team Captain:

Core Groups: Communications _____ Building _____ Events _____ Fund Raising _____

Team that you wish to be a captain for _____

Skills you can share:

Kitchen: _____

Office: _____

Outdoor: _____

Translation (please list language) : _____

Other: _____

Can we hold Community Garden Meetings at your home? _____

Can we hold Team Meetings at your home? _____

GARDEN GUIDELINES
FOR THE
PERTH DUPONT COMMUNITY GARDEN
CONFLICT RESOLUTION AND NON-COMPLIANCE
Additional Garden Etiquette

I understand the above rules and regulations and promise to follow them.

Signature of the Gardener _____

Date _____

Signature of the Coordinator _____

PAID THE YEARLY FEE OF \$10: _____