



OFFICE USE: Plot # _____ Amount Due _____ Paid Y N

MUMC Community Garden Registration

1. Gardener Information: _____
Last Name First Name

Home Address: _____

Preferred Phone number: _____ E-mail address: _____

Requests for reasonable accommodations for disabilities or limitations should be made prior to April 1.

2. **Photo permission:** I grant the Mequon United Methodist Church the right to use, publish, and copyright my image (including audio, moving image or photograph) to use in newspapers, church publications and MUMC's website or Facebook account. We would not identify your name without permission from you. *(If you do not want to be in published photos, please let any photographer you see at your garden know that.)*

Signed: (Gardener responsible for plot) _____
Name Date

3. Weed and Garden Clean Up Policy:

- a) During the growing season, if weeds go to seed and/or are in danger of spreading to neighboring plots, you will be notified and given a specific clean-up date. If your plot is not weeded by that date, the plot will either be mown off or given to someone on the waiting list.
- b) With the exception of root and bulb crops (parsnips, carrots, garlic sets) and winter-grown cover crops, **all vegetable matter must be removed at the end of the growing season**, usually on or before October 31. This includes flowering annuals, Brussels sprouts, broccoli, chard, and any other crops planted for the current growing season. Perennial plants and flowers must be cut back.
- c) Gardeners will be notified of the official end of the growing season by email, and those who do not follow the procedures will forfeit their plot to someone on the waiting list. You will receive one email notice of non-compliance at which point your plot will be re-assigned.

4. **Personal responsibility:** I hereby for myself and my family members release and discharge the Mequon United Methodist Church, 11011 N. Oriole Lane, Mequon Wisconsin and its agents and employees, from all claims, demands, actions, causes of action for, and liability for bodily harm, damage, or loss of any kind or nature arising from, or in any manner connected with myself and participation in the MUMC Community garden program.

Signed: (Gardener responsible for plot) _____
Name Date

5. For communication purposes, names, plot numbers, phone numbers and email addresses will be shared with other gardeners. *If you do not want* other gardeners to have this information, sign here: _____.

6. Payment:

**Make checks payable to:
Mequon United Methodist Church (MUMC).**

FEES: 1/2 plot = \$10.00; 1 plot = \$20.00; or as noted at the top of this sheet.

I have attached \$ _____ for my garden plot(s).