

**TOWN OF MASHPEE
2016 Community Garden Application**

Gardener Name: _____

Alternate Gardener (If Applicable): _____

Address: _____

Phone Number(s): _____
Home Cell/Work

Email: _____
Gardener Alternate Gardener

Do you have special needs which require a plot close to the driveway/turnaround? ____NO ____YES

Would you like the assistance of an experienced gardener to get you started? ____NO ____YES

Are you an experienced gardener who is willing to help a new gardener get started? ____NO ____YES

PHOTO RELEASE: Mashpee Community Garden staff, volunteers, and news media sometimes take photos at the Garden. By checking YES, you agree to allow your photo to be used as part of publicity materials. (Should you prefer not to be included in published photos, immediately notify any photographers you see at the Garden). ____YES

CONTACT RELEASE: By checking YES, you agree to allow your phone number and e-mail address to be shared with your fellow gardeners. ____YES

PERSONAL RESPONSIBILITY: By checking YES, you agree to hold the Town of Mashpee harmless from any and all liability for bodily harm, damage, or loss of any kind of nature arising from, or in any manner connected with, your participation in the Community Garden Program. ____YES

I have read, understand, and agree to abide by the rules associated with the Mashpee Community Garden.

Signature: _____ Date: _____

Cost: \$25/plot rental fee, \$50/plot refundable deposit
Each plot is approximately 8 x 12 feet

Mashpee Town Hall
Office of the Town Manager/Selectmen
16 Great Neck Road North
Mashpee, MA 02649