

Sugar Hill Community Garden Membership Application

To provide a safe and friendly community garden for members to learn, educate, and share the experience with others.

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Gardener:						
Gardener address:						
City:		State:		Zip Code:		
Email:					Phone:	
Best way to contact me: Email Phone (call)					Phone (text)	
Sugar Hill Resident? Yes No Sugar Hill Gas Customer? Yes No Sugar Hill Gas Customer?						
Emergency Contact (name):					(phone):	
I recognize that I will be required to perform 12 hours of community service annually toward the general care and upkeep of the garden.						
Committee preferen	ice	e 1.		2.		3.
Plot size desired 5x10 (1 b		5x10 (1 box	:) \$35	\$35		☐ 3 boxes \$75
Plot area desired						
Deposit (\$50 one-time deposit undated check) – a deposit check will be held by the City of Sugar Hill in case of damage or violation of the garden rules, gardener's agreement or by-laws. If a gardener is in violation the deposit will be withheld by the City of Sugar Hill.						
By signing this form, I agree that I have read and understood all garden rules and regulations. I understand that the City of Sugar Hill is not responsible for any of my actions. I therefore agree to hold harmless the City of Sugar Hill for any liability, damage, loss or claim that occurs in connection with the use of the garden by me or my guests.						
Signature of gardener:					Date:	
Make checks payable to: City of Sugar Hill						
(3/2017)						

Committees: By-laws, Compost, Food Bank, Social/Event, Water/Drainage, Maintenance, Communications

City of Sugar Hill 4988 West Broad Street, Sugar Hill, GA 30518 Parks and Recreation Department 770.831.7413/770.831.7546 fax