

Harvest of Hope, Growing with Kingsport

Community Garden Application Form

Please return completed application to:
United Way of Greater Kingsport
301 Louis Street, Ste. 201
Kingsport, TN 37660

Name: _____ Phone: _____

E-mail: _____ Mobile: _____

Address: _____ City/State/Zip: _____

I am applying: _____ for myself
_____ on behalf of _____
(name of organization)

I am interested in: _____ 4 x 8 bed(s)
(Please indicate number if you would like more than one of the 4 x 8 or 4 x 12 beds.) _____ 4 x 12 bed(s)
_____ 12 x 20 bed

I am an older adult (65+). Yes No

I am physically disabled (handicap-accessible beds may be available).

Yes No

This is my first gardening experience. Yes No

I am interested in participating in this garden because ...

Rules and Guidelines

- ☼ I recognize that the garden beds will be awarded on a first-come, first-served basis, and that the Harvest of Hope team will do its best to fulfill my preferences.
- ☼ I will have plants in the garden within two weeks of spring kickoff on Saturday, March 24 (if not before) and will keep my bed planted all season long.
- ☼ I will do my best to measure and record the success of my harvest using the materials provided.
- ☼ If I must abandon my plot for any reason, I will notify the garden leadership immediately.
- ☼ I will keep weeds at a minimum and maintain the areas immediately surrounding my plot.
- ☼ If my plot is unkempt, I understand that I will be given one (1) week notice to clean it up or it will be re-assigned.
- ☼ I will keep trash and litter out of the plot, adjacent pathways and fences and will use compost bins as directed.
- ☼ I will participate in the end-of-season cleanup of the garden.
- ☼ I will not plant tall crops where they will shade neighboring plots.
- ☼ I will pick only my crops unless given permission by another plot user.
- ☼ I will not use fertilizers, insecticides or weed repellents without permission of the garden leadership.
- ☼ I will not bring pets to the garden.
- ☼ I agree that all children (under the age of 18) will be actively supervised by a responsible adult.
- ☼ I understand that if a garden volunteer is under the age of 18 (a minor), a Release and Waiver of Liability must be signed by that volunteer's parent or legal guardian.
- ☼ I have signed the United Way of Greater Kingsport Release and Waiver of Liability.
- ☼ I understand that neither the garden group nor owners of the land are responsible for my actions. I THEREFORE AGREE TO HOLD HARMLESS THE GARDEN GROUP AND OWNERS OF THE LAND FOR ANY LIABILITY, DAMAGE, LOSS OR CLAIM THAT OCCURS IN CONNECTION WITH USE OF THE GARDEN BY ME OR ANY MEMBER(S) OF MY FAMILY.

I AGREE TO ABIDE BY THE TERMS OF THESE GUIDELINES & RULES:

_____ (sign and date)

For more information, please call the United Way of Greater Kingsport at (423) 378-3409 extension 16.