



Member Application Form – Growing Season 2019

Member Name: _____

Additional Members: _____

Address: _____

Telephone Number(s): _____
Home cell

Email Address: _____

Did you have a plot last year? _____ If so, would you like the same spot? _____

Would you be interested in sharing a plot? _____

- ❖ Plot Fee: \$20.
- ❖ Returning gardeners, please confirm registration by Thursday, February 28. Check must be received by Saturday, March 9.
- ❖ Starting March 1, registration is open to all who live and work in Bolton.
- ❖ Formal or informal groups, troops or clubs are welcome.
- ❖ Make the check out to “**Bolton Local**” and send this form plus a check to: **BCG** c/o Jeffrey Bryan, 5 Manor Rd, Bolton, MA 01740.
- ❖ Questions? Contact Jeff at jeffreybryan3@gmail.com or 978-430-2011

I, the undersigned, signify that I have read the 2019 Bolton Community Garden Guidelines and I and my guests will abide by them.

I understand that the Bolton Community Garden, the Town of Bolton, and the owners of the access roads and parking areas are not responsible for my actions. I therefore agree to hold harmless the Bolton Community Garden, Bolton Local, the Town of Bolton and the owners of the access roads and parking areas for any liability, damage, loss or claim that occurs in connection with use of the Bolton Community Garden by me or my guests.

Signature

Date

More information can be found at www.BoltonLocal.org

BCG use: Plot# _____ Fee \$ _____

