

parties and individuals.



	2024 B	angor Commu	nity Garden Application
Applicant:			Co-Gardener:
Name:			Name:
Street:			Email:
City:	State:	Zip:	Phone:
Email:			
Cost:	\$25 for the first raise	ed bed, \$20 for each	additional bed (max 4/household 6/organization)
☐ 1 Bed (\$25)	☐ 2 Beds (\$45)	☐ 3 Beds (\$65)	☐ 4 Beds (\$85) ☐ 5 Beds (\$105) ☐ 6 Beds (\$125)
*Would you lik	_		year?  Yes  No (If yes, please list the beds you had,
Please return signed application and payment to: Bangor Parks & Recreation			Please make checks payable to:
647	Main Street		City of Bangor
Ban	gor, ME 04401		Memo: Bangor Community Garden
me	emo line of your chec	k. All donations will l	e gladly accepted. Please state the donation amount in the pe acknowledged and are tax deductible.  Cational Beds or Raised Beds for Maine Harvest for Hunger.
		(207)992-4490 <b>Gardeni</b>	Bed or General questions?  Jenny.Coon@bangormaine.gov  ng questions?  @ (207)631-8574
relate to ave garde • I agre • The u	ed requirement that the coid lead contamination. eners to thoroughly rinse to the following Hold undersigned adult on be	cultivation of all edible As is recommended for wash vegetables prior Harmless Clause (requalf of themselves, their	ead contamination on the site. I understand and acknowledge the crops occur in raised beds and am aware of the precautions necessary rany harvested crops, Bangor Parks & Recreation encourages to consumption.  hired by the City of Bangor):  r child and/or children, agrees to protect, defend, indemnify, and hold agents from any and all claims, demands, suits, penalties, losses,

Member Signature Date

By my signature, I acknowledge that I have read and understood the conditions of membership in BCG. I understand that failure to comply will result in non-renewal/non-approval of my application and/or termination of gardening privileges

damages, judgments, or costs of any kind whatsoever arising out of or in any way resulting from the activities of said