



Membership Application Form

2017 Season

Please return WITHOUT DUES to: Sharon Anduri at 3360 Kincheloe Ct., Lafayette, CA 94549

(You will be notified if there is space. If not you will be put onto a waiting list.)

Name(s): _____

Phone number: Home (_____) _____ Cell (_____) _____

Email Address: _____

Address: _____

1. I am applying for membership as ___an individual (\$100) ___ a family (\$150)
2. I am applying as: ___ a working member ___ an associate member (and will not be asked to fulfill the six hour/month minimum service to the garden)
3. I am adding to my membership dues a voluntary tax-deductible donation of \$_____.
4. ___I have no access to gardening space where I live. ___I am a senior (65+).
5. I would like to be on the following one, two or three committees (Please rank 1,2,3 with 1 being of most interest, and designate "leader" if you are willing to be team leader.)

- | | | |
|---|---|---|
| <input type="checkbox"/> Education <input type="checkbox"/> | <input type="checkbox"/> Construction | <input type="checkbox"/> Nature Trail and creek restoration |
| <input type="checkbox"/> Garden docent <input type="checkbox"/> | <input type="checkbox"/> Propagation | <input type="checkbox"/> Kids' area development |
| <input type="checkbox"/> Watering <input type="checkbox"/> | <input type="checkbox"/> Succulents | <input type="checkbox"/> "Heart of the Garden" development |
| <input type="checkbox"/> Plumbing/Irrigation Maintenance <input type="checkbox"/> | <input type="checkbox"/> Signs | <input type="checkbox"/> Recipe book and recipe sharing |
| <input type="checkbox"/> Membership <input type="checkbox"/> | <input type="checkbox"/> Herbs | <input type="checkbox"/> Scout liaison |
| <input type="checkbox"/> Fundraising <input type="checkbox"/> | <input type="checkbox"/> Flowers | <input type="checkbox"/> Community/Senior outreach |
| <input type="checkbox"/> Social committee <input type="checkbox"/> | <input type="checkbox"/> Chickens | <input type="checkbox"/> Other role I'm fulfilling or would like to do: _____ |
| <input type="checkbox"/> Harvest fest <input type="checkbox"/> | <input type="checkbox"/> Compost | |
| <input type="checkbox"/> Plant sales <input type="checkbox"/> | <input type="checkbox"/> Communications and/or social media | |
| <input type="checkbox"/> Trash and recycling <input type="checkbox"/> | <input type="checkbox"/> West end and natives | |

EMERGENCY CONTACT INFORMATION:

In case of emergency, please contact:

Name _____ Phone number (_____) _____

Name _____ Phone number (_____) _____

In case of emergency, hospital name _____

Please list any medical, physical or psychological conditions we should be aware of:



NORMS and RULES 2017 Agreement

Please read and sign:

The "Lafayette Community Garden and Outdoor Education Center" is a community site open to the entire community during set hours when there is supervision by a garden member. The "Lafayette Community Garden" is a sub group of individuals and/or families. Members from 2016 will be given the opportunity to renew memberships for the 2017 year. Additional members will be chosen on a first come, first serve basis, with Lafayette residents being given first priority. At least twenty-five garden members will be Lafayette residents who have no other access to gardening or growing food. At least 10 of the members will be seniors (over 65). The members will make a commitment to be involved in a collaborative gardening effort following the set of norms and rules:

Agreement and fee. Participation at the garden will be capped at 80 memberships, with 50 to 60 of those to be working members/families who must submit a completed, signed "Agreement" by November 30, 2017. Associate memberships will make up the remaining memberships. If there are more than 80 working member applications received, a waitlist will be created for future openings. Lafayette residents are given priority. The membership fee to support the garden is set at \$100 per individual or \$150 per family for the 2017 year. *This is the same for both working and associate memberships.* Membership dues are payable by November 30, 2017. No one will be turned away due to financial hardship. A fee waiver request should be made to Sharon Anduri or Janet Thomas.

Use of chemicals. This is an organic garden. You agree never to use unapproved chemical pesticides or herbicides.

Service commitment for "working members. You/your family agrees to perform six hours per month in service to the garden. Tasks will be structured to fulfill goals as determined by the board, garden director and at garden member meetings. Tasks will be organized by the garden director. Working members may also fulfill their service commitment by participating in committee work as approved by the board.

Meetings. Members are asked to participate in monthly garden meetings whenever possible. □

Contact information. Members must ensure that the membership chair has current address, phone number and email addresses.

Please update emergency contacts whenever necessary.

Transferability. You may not transfer your place as a community garden member to another person.

Leaseholder requirements. You agree to be bound by any requirements that EBMUD and the City of Lafayette has determined as necessary for garden participants.

Expected conduct. To retain membership privileges, members agree to:

1. Act in a manner considerate of the rights, needs and safety of other gardeners and the community at large and □with courtesy toward others. □
2. Respect EBMUD property and not cut down any living plant material without the agreement of the garden manager. □
3. Supervise children in the garden area. □
4. Not bring dogs, other than guide dogs, to the garden area. □
5. Respect the Lafayette Community Garden's property and assets. Use equipment and tools responsibly and treat them with care. Return them to the shed promptly and store them neatly and securely for the safety and convenience of fellow gardeners. □

I understand that neither the garden group nor owners of the land are responsible for my actions. I, THEREFORE, AGREE TO HOLD HARMLESS THE LCG and OLC, SUSTAINABLE LAFAYETTE 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 OF MY GUESTS.

I have read the Lafayette Community Garden rules. I agree to abide by these rules.

SIGNATURE (individual or head of household) _____ DATE _____