## Marshfield Community Garden Application Form (As of January 2015) Please print and fill out 2 copies, keeping one for your records

Name:	& Mailing Address:
Contact information: Email Address:	
Telephones: Home:	Cell:
	<b>2015 summer season.</b> I would like: each) AND/OR half sized plots (15 x 20 ft, \$10 each). ext to a friend. Name:
Is there anything you would like to sha	for how long? are with us? Special skills? Access to equipment? Willing to tions?
approved or that are on the approved. All productions of the surface of the surfa	ders between my plot, my neighbors and the walkways by planting on those areas and by maintaining a walking path between them. they would shade neighboring plots.  In the series of the areas surrounding my plot, walkways and fence. If my plot, and the entire Community Garden area. Understand that I will be given one week's notice to clean it up. signed or tilled in and garden privileges revoked. Sesigned communal chores of the garden, such as mowing, turning to cannot complete an assigned task for any reason, I will take it with another gardener.
the Marshfield Community Garden are <b>HARMLESS</b> the Agricultural Commissio Marshfield Community Garden <b>FOR AN</b>	mission, The Town of Marshfield, or any volunteers associated with NOT responsible for my actions. I THEREFORE AGREE TO HOLD on, Town of Marshfield, and/or any volunteers associated with the NY LIABILITY, DAMAGE, LOSS OR CLAIM THAT OCCURS IN GARDEN BY ME OR ANY OF MY GUESTS.
Signature:	Date:
Make checks out to: "Town Of Marshi	field"

Mail Application with check to: Annie Massed, 496 Pine St, Marshfield, MA 02050