

**#OUR COMMUNITY GARDEN NAME#
Membership Application Form**

Date: _____

Name: _____ **Parcel #'s:** _____

Address: _____

Phone: (____) _____ Cell Phone: (____) _____

Email: _____

Occupation: _____ Work Phone: (____) _____

Work Email: _____

I prefer to be contacted by: __ phone or __ e-mail

Spouse's Name: _____

Cell Phone: (____) _____

Email: _____

Occupation: _____ Work Phone: (____) _____

Work Email: _____

Emergency Contact's Name: _____

Address: _____

Phone: (____) _____ Cell Phone: (____) _____

Children Living at Home (name/age): _____, _____,
_____, _____, _____

Gardening Experience: _____

Would you like to work on one or more of the following committees? (Please check your choice[s].)

Fund Raising Community building Compost Maintenance Water Management General Support

For Board of Directors Use: \$ _____ Dues Received on _____ by _____

Comments: _____

AGREEMENTS

I have received, read, and agree to abide by the Operating Rules and Regulations of the # OUR COMMUNITY GARDEN NAME #, dated _____ .

Parcel assignments & waiver liability agreement: I THEREFORE AGREE TO HOLD HARMLESS #OUR COMMUNITY GARDEN NAME# AND OWNERS OF THE LAND FOR ANY LIABILITY, DAMAGE, LOSS OR CLAIM THAT OCCURS IN CONNECTION WITH THE GARDEN BY ME OR ANY OF MY GUESTS.

Signature and Date

RELEASE AND WAIVER OF ALL LIABILITY AND ASSUMPTION OF RISK AGREEMENT

(Signed form required of all adult Garden Members and guests who will be present at the garden site, as specified in the General Rules and Regulations.)

By signing this application, I agree to release #OUR COMMUNITY GARDEN NAME# (#OUR GARDEN#), its agents, its employees and its certified volunteers from and against any claim arising from my or my household's participation in the program noted on this registration form. I agree to indemnify and hold #OUR GARDEN# harmless from and against any claims, whether caused by passive negligence or otherwise. I will pay all costs incident to any claim, including, without limitation, attorney's fees. I agree that this agreement is intended to be as broad and inclusive as permitted by the law of the State of Illinois.

FOR GOOD AND VALUABLE CONSIDERATIONS, including permission to participate in #OUR GARDEN# gardening and related activities, I, for myself, my successors, heirs, assigns, executors, administrators, spouse and next of kin:

1. Agree that prior to participating I will inspect the facilities, equipment and areas to be used, and, if I believe any of them are unsafe, I will immediately advise the person supervising #OUR GARDEN#, activity, facility or areas;
2. Acknowledge that I fully understand that my participation may involve risk of serious injury or death, including economic losses, which may result not only from my own actions, inactions or negligence, but also from the actions, inactions or negligence of others and the condition of the facilities, equipment or areas where the #OUR GARDEN# or activity is being conducted;
3. Assume any and all risks of bodily injuries to myself, including medical or hospital bills, permanent or partial disability, death and damages to my property, caused by or arising from my participation in this event or activity;
4. Covenant not to use, or present any claim for personal injury, property damage or wrongful death against #OUR GARDEN# (and their officers, employees and agents) or the owner of the gardening project property for damages attributable to my participation in the #OUR GARDEN# activity;
5. Release, waive, discharge and relinquish #OUR GARDEN# (and their officers, employees and agents) and the gardening project property owner from any liability, loss, damage, claim, demand or cause of action against them whether same shall arise by their negligence or otherwise;
6. Agree that photographs, pictures, slides, movies or videos of me may be in connection with my participation in this event or activity without compensation from #OUR GARDEN# (or Permittee/Sponsor) and consent to the use of these photographs, pictures, slides, movies or videos for any legal purpose;
7. Warrant that I am in good health and have no physical condition that would prevent me from participating in this event or activity;

THIS DOCUMENT RELIEVES #OUR GARDEN#, AND OTHERS FROM LIABILITY FOR BODILY INJURY, WRONGFUL DEATH AND PROPERTY DAMAGE BY NEGLIGENCE. I HAVE READ THIS DOCUMENT, UNDERSTAND THAT I GIVE UP SUBSTANTIAL RIGHTS AND ASSUME ALL RISKS BY SIGNING IT AND SIGNED VOLUNTARILY.

NAME	PARCEL #'S
ADDRESS	
SIGNATURE	DATE