Happy Valley Community Garden Application Form

Happy Valley Community Garden is open to residents of Happy Valley only.

Proof of residency will be required.



Primary Applicant/Gardner				
Name				
Address			Zip Code	
Phone #	Email Address			
Applicant/Gardener Partner (if ap	plicable)			
Name				
Address			Zip Code	
Phone #	Email Address			
			Plot size r	request
Request for a specific plot number (see attached plot map). Request may or may not be accommodated.			○5' x 5'	' ○5' x 10'
I HEREBY CERTIFY THAT I HAVE REAGREEMENT. I UNDERSTAND MY			COMMUNITY	GARDEN
Signature		Signature		
Printed Name		Printed Name		
Date		Date		
Please note: All gardeners are recleaders. In addition, a gardeners Gardeners agree to use email add	name, phone number ar	nd email address list	is shared with	n all gardeners.
Application Checklist		For Committee Use Only:		
Complete & sign the Garden Agreem	ent and Application	Date		Proof of
○ Submit proof of Happy Valley residen	ncy	Time Received		Residency Verified. Copy
Print Form		Assigned Plot		attached.