

**ALTONA COMMUNITY GARDEN
APPLICATION FORM - 2020**

Application Coordinator:

Jack Heppner

Phone: 204-304-0656

Email: altonagardening@gmail.com

Fee Schedule:

Half Plot (15 x 22.5 ft) \$9.00

Full Plot (15 x 45 ft.) \$18.00

Each Additional Plot \$9.00

Wheelchair Accessible Plot \$9.00

Name: _____

Address: _____

Phone Number: _____

Email Address: _____

I am requesting:

_____ Plot(s)

_____ The same plot(s) for next year

_____ The same plot(s) for next year with no tilling by
the Town.

Plot number(s) assigned: _____

Note any special requests below:

Total Fee: _____ Paid: _____

Signature of Applicant: _____

Signature of Coordinator: _____

Date: _____

**ALTONA COMMUNITY GARDEN ASSUMPTION OF
RESPONSIBILITY, RISKS, AND LIABILITY WAIVER**

**BY SIGNING THIS LEGAL DOCUMENT YOU WILL BE
GIVING UP CERTAIN LEGAL RIGHTS, INCLUDING THE
RIGHT TO SUE – PLEASE READ CAREFULLY.**

I, _____, hereby
acknowledge and confirm that prior to signing this
document I have been informed that the Altona
Community Garden does not carry liability insurance for
the mutual benefit of both myself, the Town of Altona
and the Altona Community Garden against any and all
claims arising out of my use or occupation of the
premises. I realize there are potential risks inherent in
my use of the premises. Initials: _____

I agree to assume all responsibility and risk and
indemnity and save harmless the Altona Community
Garden, the Town of Altona, and the Altona Community
Action Network from any and all actions, including
negligence, claims, damages, and demands whatsoever
which they may bear as a result of my use of or
occupation of the premises, by reason of damage to any
and all property and any and all bodily injuries,
including death, of others or myself.

Initials: _____

I hereby release and discharge the Altona
Community Garden, the Town of Altona and the Altona
Community Action Network from any and all actions,
causes of action, including negligence claims, damages,
and demands by me and by my heirs, executors, or
assigns, for, upon or by reason of any damage, loss,
death or injury to my person or property which may be
sustained as a consequence of my use or occupation of
the premises by myself, my agents, servants,
employees, contractors, and invitees.

Initials: _____

I hereby affirm I am of the age of majority or older. I
have carefully read this document, and I understand its
contents. I am aware this document is an assumption of
risks and release of all liability and a contract
enforceable against me. I have signed this document of
my own free will.

In consideration of being allowed to use or occupy
the premises, I have executed this agreement under my
hand, this _____ day of _____,
20_____.

SIGNED AND DELIVERED in the presence of

Witness _____

Garden Plot Renter _____