

Rock Island Community Garden Program 2020 Application

Please complete all sections of the application. See attached materials for more information. If you have questions or concerns please call 309-732-2000 or visit the CED Department at City Hall, 1528 3rd Avenue.

Name: _____

Address: _____

Phone: _____

Primary Language Spoken: _____

Applicant Type:

First Time Applicant

Applied Last Year

Requested Garden Site (Ranked Choices):

1st:

2nd:

3rd:

Planting Description

List the crops you intend to plant. Attach additional pages if needed.

Donations

Do you intend to donate half or more of what you grow to a non-profit organization, food pantry, or similar entity that benefits the community by reducing hunger and food insecurity among low income citizens?

Yes

No

Water Service

One free full water tank will be available at each site. Each tank holds 250 gallons of water.

Participants who wish to refill their tank will have to pay an additional \$50 per requested refill.

Incomplete applications will not be accepted. Applications are prioritized in accordance with the Program Policies. Due to space limitations staff makes no guarantee that applicants will be assigned their requested garden sites. Applicants whose applications are accepted will be notified and are required to attend an one hour program orientation meeting scheduled between May 4 and May 18. Final lease agreements will be signed at the conclusion of the Orientation Meeting and payment will be due at that time. By signing below, you acknowledge that you agree to abide by the Program Policies.

Signature

Date

Return applications to the CED Department at City Hall no later than Friday May 1.