Roger Allison Memorial Garden

1349 6th St. Muskegon, MI 49441

Sponsored by Nelson Neighborhood Improvement Association

Garden Plot Application for 2017 Growing Season

Name:				
Address:		City:	Zip	_
Phone:	\Cell #	E-Mail:		
Are you a veteran?	Yes	☐ No		
Have you paid your annua If no, please include \$5 w		mbership dues?	Yes No	
List the names and pho who will be picking produced		•	helping with this plot incl	uding anyone —
I,leadership group, nor th	ne owners of the		rstand that neither the ga	 arden ny actions. I
therefore agree to hold	harmless the N nat occurs in cor	elson Neighborhood Ir nnections with use of t	nprovement Association f he garden by me, my fam	or any liability,
Signature:			Date:	
Garden Coordinator	s Acceptance:		Date:	

Please send a copy of signed application and a signed copy of guidelines/rules to NNIA Garden Committee Chair – Deb Warren; debra.warren@shorelinecity.com. Please keep a copy for your records.

Roger Allison Garden Coordinators: Ann Craig, 231.578.8257; Information contact: Donna Iverson, Iversondonna@gmail.com; NNIA Garden Committee PO Box 1224 Muskegon, MI 49443

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Guidelines and Rules:	
I will respect others' space and the purpose of the Garden	
I understand that the Nelson Neighborhood Improvement Associat	ion sponsor this garden and require all
gardeners to be current members by paying the annual \$5.00 members	hip dues. This membership helps to off-
set the cost for water and other maintenance.	
By June 11 th I will have something planted in my plot.	
I will keep the plot planted throughout the summer.	
If I must abandon my plot for any reason, I will notify the garden co	oordinator.
I will keep weeds down, trash and litter cleared from the plot and a	djacent pathways. I understand that if
my plot becomes unkempt, I will be given 1 week notice to clean it up.	
At that time, the plot may be re-assigned or tilled in.	
It is my responsibility to pick crops when they are ripe, crops that I	am willing to share with others, will be
placed on the Sharing Table.	-
If I take produce from other gardener's plots without their permiss	ion, it will not be tolerated and my
gardening privileges will be in jeopardy.	•
I will plant tall crops where they will not shade neighboring plots.	
I am responsible for fall harvesting and completing a clean-up of m	y garden plot by Thanksgiving. I will also
help with the clean-up of the perennial garden area.	
I will not have unrestrained pets in the garden or allow them to dar	mage plants.
I WILL NOT USE FERTILIZERS, INSECTICIDES OR WEED REPELLANTS	
I will return tools to safe storage places off the ground after any wo	ork session in the garden.
I have read and accepted the above guidelines and rules and indica	te with my signature below that I will
comply in order to remain a plot manager.	
I,, understand tha	t neither the garden leadership group,
nor the owners of the property the garden is on are responsible for my a	
harmless the Nelson Neighborhood Improvement Association for any lia	_
in connections with use of the garden by me, my family, or any of my ga	•
the Guidelines and Rules given to me.	
•	
Signature:	Date:
Garden Coordinators Acceptance:	Date:

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