PLYMOUTH Community Gardens

Plymouth Community Gardens Permit Form

Contact Informa	ation			
First & Last Name		Home Phone		Cell/Work Phone
		()		()
Address Email *REQUIRED*				
City		Zip	☐ Returning Re	enter
			■ New Renter	
Plot Informatio	n		·	
Plot Choices:	1 st Choice #	2 nd Choice #		3 rd Choice #
	arks & Recreation will do our bes f will contact you with your confi one v		you do not specify t	
Waiver:				
City shall not be re	the right to exercise supervisory aut esponsible for interruptions of the u s permit for reasons of public safety	se of the described facil		
	nd agree that I (we) have read and tion procedures, liabilities and respo	-		e of this Plymouth facility,
the City for any do third party resulti	vithout limiting the generality of the amages to City personnel, facilities, ng from the use authorized hereby. of the facilities authorized hereby.	equipment or other City	property, or to the pr	operty and/or person of any
Photo Waiver: / upurposes.	ınderstand that the City may use ph	notographs taken at its p	programs that picture	me or my dependents for publicity
	you choose not to use your garden piting list. If the garden is claimed by 2.1.			
Signature:				Date:
Plot Fees & Pay	ment:			
Rental Fee = \$4	5/Plot			
Payment: MasterCard	☐ Cash ☐ Check #_☐ Visa	D Am	nerican Express	□ Discover □
Name on Card:				
Card Number:				Exp. Date/
Signature:				
OFFICE USE ON	NLY:			
Date Received:	/2024		Received:	☐ In-person
Time Received:	:a.m./p.m.		Received and Registered by: (initals)	