

Clark Botanic Garden
2021 Family Community Garden Application

Name: _____

Date: _____

Address: _____

Telephone: _____

E-Mail: _____

**Please enclose a check for \$100.00 payable to:
Town of North Hempstead**

By signing below, I agree that I have read and understand the 2021 Gardener Guidelines and plan to abide by all of the garden rules.

I, the undersigned, am applying for the use of one ~4' x 12' community garden bed for the 2021 season in the Clark Botanic Garden, 192 I.U. Willets Road, Albertson, N.Y. 11507. I realize that Town of North Hempstead is not responsible for the loss, theft or damage of any personal property used in or left at the garden.

Signed: _____
Signature of Applicant

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For Official Use:

ID for Town Resident: \_\_\_\_\_

Lot Number Assigned: \_\_\_\_\_ Date: \_\_\_\_\_