2018 Troy Community Garden Application

1. General Information					
□ NEW Gardener □ RETU	JRNING :	gardener (ple	ease register with sar	me name as last year)	
Last Name:		First N	ame:	Other Name :	
Mailing Address:					
E-mail:			Phone	e:	
BEST Contact Method:	□ Email	□ Phon	e		
Language(s): ☐ English ☐	☐ Hmong	□ Lao	☐ Spanish	Other	
Garden Partner (optional, will be Last Name:			•	<i>,</i>	
Email:					
2. Plot Assignment (RETURN)	ING Gard	eners Only N	NEW gardeners will	be assigned a plot based on a	availability)
Check all that apply:			Enter # of plots:	Notes for plot assignment:	
☐ I want the same # of plot(s		ear			
☐ I want one additional plot		agn't matter			
☐ Nearest my current plot Total # of plot(s) I would like	• •				
Town of prov(c) I would find		(
3. Volunteer Hours: All garden	ners are re	quired to volu	unteer 3 hours/plot.	How will you complete these	hours?
Work (choose one)		Pay (choose	one)	· · ·	
☐ Attend a work day(s)	OR	☐ Prepay \$3	30/plot		
☐ Join a team (see below)		☐ I am a Tir	nebank member, ple	ease debit me 3 hours/plot	
Join a Team! Teams are a great	way to ge	t to know othe	er gardeners and vol	unteer on your own schedule	·.
Check the box for each team you			_		
☐ Admin ☐ Plot monitoring			•	•	•
4. Agreement					
☐ I have read and agree to fol	llow the g	arden rules a	and expectations lis	sted separately.	
☐ I have filled out the demogra	•	1 0			
☐ I am willing to have my cor			S	S	
Photo Permission : By signing below reproduce any videotapes, audio tape promotional, and visual purposes by	s, photogra	phs, films, neg	atives, and print repro	oductions of you or your family	
Personal responsibility: By signing Community Land Trust, and Dane Community and all liability for bodily hactivity on the entire Troy Gardens significant.	ounty UW arm, dama	Extension and	the agents, employees	, and volunteers of the entities s	tated above, harmless
Signature:				Date:	
Who filled out this application if it	was not th	na gardanar ⁹		Dhone	

Payment

Determine Your Plot Fee

Find your maximum household income and circle the corresponding plot fee.

Household size	Inco	ome	Inc	ome	Income		
or number of gardeners	Monthly	Monthly Annual		Monthly Annual		Annual	
1-2	Up to \$2,500	Up to \$30,000	\$2,500 - 3,915	\$30,001 - 47,000	Over \$3,915	Over \$47,000	
3-4	Up to \$3,165	Up to \$38,000	\$3,165 - 4,915	\$38,001 - 59,000	Over \$4,915	Over \$59,000	
5-6	Up to \$3,580	Up to \$43,000	\$3,580 - 5,665	\$43,001 - 68,000	Over \$5,665	Over \$68,000	
7 and more	Up to \$4,000	Up to \$48,000	\$4,000 - 6,500	\$48,001 - 78,000	Over \$6,500	Over \$78,000	
Fee per plot per year*	\$15		\$	43	\$78		

^{*}Plot fee includes \$3 water surcharge

Calculate Payment

What?	How much?		h?	How many?	Total Fees
Garden Plot Fee (see above)	\$15	\$43	\$78	× #plots*	\$
Incomplete 2017 volunteer hours**	\$10 per hour missed			× # of hours missed	\$ Debit my Timebank***
Optional:					
Prepay 2018 volunteer hours****	\$30.00 per plot			× # plots	\$ Debit my Timebank***
Marsh Hay (pick up on Opening Day)	\$5.50 per bale			× # bales	\$
Row Cover (approx. 10'x10')	\$5.50 each		h	× # pieces	\$
Donation to Community GroundWorks					\$
Please make checks payable to: 'Community GroundWorks.'				TOTAL DUE:	\$

^{*#} plots listed above must match the # plots requested in Section 2 of page 1.

****No partial payments allowed (i.e. can't pay for 2 hours and work 1 hour).

For Troy Use Only:					
Amount Received \$					
☐ Cash	☐ Check #				
	Staff Initials				
Be sure the gardener's name appears on check.					

Please return pages 1-3 of this packet with your payment:

3rd	Mail To:		Attend:
March	Community GroundWorks	OR	Spring Registration
BYNI	3601 Memorial Dr., Suite 4	UK	March 10 th 10am-noon
V	Madison, WI 53704		Lakeview Lutheran Church

If you have questions, please email <u>troy53704@gmail.com</u> or call (608) 313-5188.

^{**}You must pay for incomplete volunteer hours before we will accept your application. A postcard was mailed to you in early February listing the number of incomplete hours (if applicable).

^{***}You must be a current Timebank member. We will debit you 1 hour/# of incomplete volunteer hours owed and 3 hours/plot for prepaid hours.

Troy Community Garden Demographics Form 2018

*Your information remains <u>anonymous</u> and is collected by the Gardens Network for funding purposes

1) FIRST circle the number of people in your house, THEN circle your household's maximum gross annual income:

1	2	3	4	5	6	7	8	Other:
Ť	† †	† † †	† † †	† † † † †	† † † † † †	† † † † † † †	† † † † † † † †	Enter # of people:
•	•	•	•	•	•	•	•	•
Less than \$17,900	Less than \$20,450	Less than \$23,000	Less than \$25,550	Less than \$28,780	Less than \$32,960	Less than \$37,140	Less than \$41,320	Enter your income:
\$17,900- 29,750	\$20,450- 34,000	\$23,000- 38,350	\$25,550- 42,600	\$28,780- 55,260	\$32,960- 49,450	\$37,140- 52,850	\$41,320- 56,250	\$
\$29,751- 47,500	\$34,001- 54,400	\$38,351- 61,200	\$42,601- 68,000	\$55,261- 73,450	\$49,451- \$78,900	\$52,851- \$84,350	\$56,251- \$89,800	
More than \$47,500	More than \$54,400	More than \$61,200	More than \$68,000	More than \$73,450	More than \$78,900	More than \$84,350	More than \$89,800	
-				oility? #	_			
3) IS this a	female heade	a nousenoia?	☐ Yes	□ No				
4) How man	ny people in yo	our household	d identify as:	Hispanic/Lat	tinx: #	_ Non-Hispa	anic/Latinx #_	
5) How man	ny people in ye	our household	d identify as:					
Asiar	n/Southeast A	sian/Pacific Is	slander: #	• Nativ	ve American/A	American India	an: #	_
→ Black	c/African Ame	rican:	#	→ Whit	e/Caucasian:		#	_

→ Other:

6) Do you live within a half mile of the garden (see map)? □ Yes □ No

Multi-racial:

