



**PARKS &
RECREATION**
CITY OF LONGVIEW

2020 Community Garden Registration



Registration Begins - January 2, 2020

Returning Gardeners:

Have until February 21, 2020
to retain 2019 space

New Gardeners:

Starting March 2, 2020
(first come basis)

Additional Spaces:

April 30, 2020
(if available)

Name: _____

Phone: (required) _____ Email (required): _____

Address: _____

City: _____ Zip Code: _____

Please register me for garden space(s) # _____ Alternate # _____

Please register me for any space available: _____ Yes _____ No

Co-Gardener Name(s): _____

Address: _____ Phone: _____

- First Time Gardener
 Some Experience
 Very Experienced
 Would be willing to mentor other gardeners

	Cost		Number of Spaces: _____ (limit 2)
20' x 40' Space		10' x 40' Space	In-city: _____
In-city \$69		In-city \$45	Out-of-city: _____
Out-of City \$74		Out-of-city \$50	Total Fee: \$ _____

2020 Community Garden Registration Form

1. Please notify the department two weeks in advance if the above participant has a disability needing special arrangements, assistance, or any condition which would limit the participant in this activity.
2. The City of Longview does not provide medical or accident insurance coverage and are not responsible for personal articles lost, stolen or damaged.
3. I allow photographs taken during Parks & Recreation activities to be used in the promotion of future City programs.
4. I agree to abide by and follow the activity and registration policies and procedures.

5. Assumption of Risk, Waiver, and Release

I am fully aware of the fact that there are special dangers and risks inherent in this activity, including, but not limited to, the risk of serious physical injury, death or other harmful consequences that may arise or result directly or indirectly to me from my participation in this activity. Being fully informed as to these risks and in consideration of my being allowed to participate in City sponsored activities, I hereby assume all risk of injury, damage, liability and harm to myself arising from such activities. I also hereby individually and on behalf of my heirs, executors and assigns, release and hold harmless the City of Longview, their officials, employees and agents and waive any right of recovery that I might have to bring a claim or a lawsuit against them for any personal injury, death or other consequences occurring to me arising out of my voluntary participation in this activity, except for the sole negligence of the City of Longview.

I certify that I am the participant or the parent or legal guardian of the participant named above, that I have read and understood the foregoing release and that I join the release without reservation, granting full consent and authorization for the above named person to participate in the activity.

Signature of Participant or Parent/Legal Guardian (if participant is under 18)	Print Name	Date
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Note: By registering you agree to follow the community garden rules & regulations.

Please Turn Over for Registration Information Sheet

Parks & Recreation
Register Now
By Phone: 360-442-5400
By Fax: 360-442-5955
Walk-in: 2920 Douglas Street
Drop Slot: 2920 Douglas Street

Payment Amount \$ _____

Include check made payable to City of Longview or

Credit Card information :

Visa MasterCard Card Number: _____

Expiration Date: _____ Security Code (3 digit back card right side): _____