

Heideman Community Garden Application



Name:

Address:

Phone:

Email:

Library Card Number:

Each Gardener will be limited to one raised bed. There is a refundable deposit of \$20/bed.
The deposit will be returned at the end of the gardening season if the bed is properly maintained.

Please choose one:

Raised Bed

ADA Compliant Wheelchair Accessible Bed

The Gardener understands that neither the Crete Public Library District, its staff, nor the Library Board of Trustees are responsible for the Gardener's actions. The Gardener and their guests agree to hold harmless the Crete Public Library District, the Library Staff, and the Library Board Trustees for any liability, damage, loss, or claim that occurs in connection with the use of the Jan Heideman Community Garden.

Photo permission: From time to time, gardeners, the Garden Coordinators, a library representative, and the media may take photos in the garden. Please let the photographer(s) know if you prefer not to appear in promotional materials.

The Library is not responsible for any theft, damage, or vandalism to any garden bed or any supplies left in the Garden by the Gardener.

This Agreement shall not be assigned or sublet.

Failure to follow the Garden rules will result in the loss of the garden bed and the deposit will be forfeited.

Signature: _____

Date: _____

LIBRARY USE ONLY

Staff Initials:

Date Received:

Time:

Approved: Yes or No

Bed Number: