

Application for Sunrise Rotary Community Garden

Individual ____ Group ____

Groups: Youth ____ Adult ____

Gardener/Group name _____

Address _____

Phone Day _____ Evening _____ email _____

I am a senior citizen. ____

I have physical limitations. ____

I am an experienced gardener. ____

I am a novice gardener. ____

If you are a new gardener, would you like an experienced gardener to help you?

Yes ____ No ____

If you are an experienced gardener, would you like to help a new gardener?

Yes ____ No ____

Please briefly give your reason for wishing to participate in the Community Garden.(e.g.:
personal use, contribution to food bank, learning about gardening.)

Annual fee: \$40

Some tools provided.

Some scholarships available.

Questions? Contact Judy Hodges 532-6132

Return completed applications to: Sonora Sunrise Rotary

P.O. Box 4495

Sonora, CA 95370