



Parks and Recreation Department City of Bellingham

2024 Community Garden Plot Registration-New Plot Holders

The City of Bellingham maintains three Community Gardens in Bellingham:

Fairhaven Garden
10th and Wilson
parks@cob.org

Sven Hoyt Garden
32nd St between Taylor Ave & Donovan Ave
parks@cob.org

Lakeway Garden
Lakeway Dr & Woburn St
parks@cob.org

All three gardens are open year-round. Plot registration is **\$50.00** per calendar year. New gardeners are encouraged to visit the Community Garden site and to contact the Parks Department with any questions before requesting a plot(s)

Please complete this registration form at the time of your plot(s) assignment. You can bring it to the Parks Admin Office along with payment by check or cash (exact amount) or send by mail at Bellingham Parks Department, 210 Lottie St. Bellingham, WA 98225 or email at parks@cob.org and pay with a credit card over the phone at 360-778-7000 M-F 8:30am – 4:00pm

Name _____ Date _____

Address _____

City _____ Zip _____

Phone (home) _____ Alternate _____

Email Address: _____

Garden:

___ Fairhaven Garden (1 plot maximum)	Plot # _____			
___ Sven Hoyt Garden (3 plot maximum)	Plot # _____	Plot # _____	Plot # _____	
___ Lakeway Garden (4 plot maximum)	Plot # _____	Plot # _____	Plot # _____	Plot # _____

Main Office
210 Lottie Street
Suite 202
Bellingham, WA 98225
Phone: (360) 778-7000
Fax: (360) 778-7001
Email: parks@cob.org
www.cob.org/parks

Operations
2221 Pacific St
Bellingham, WA 98229
Phone: (360) 778-7100
Fax: (360) 778-7101
Email: parks@cob.org
www.cob.org/parks

Arne Hannah Aquatic Center
1114 Potter Street
Bellingham, WA 98229
Phone: (360) 778-7665
Fax: (360) 778-7062
Email: aquatics@cob.org
www.cob.org/ahac

Bayview Cemetery
1420 Woburn Street
Bellingham, WA 98229
Phone: (360) 778-7150
Fax: (360) 778-7151
Email: bayview@cob.org
www.cob.org/bayview

Please fill out the information below and submit with payment to complete Community Garden Registration.

- I have read the Community Garden Rules and understand that failure to meet the guidelines may result in loss of program fee and gardening privileges.
- I agree to volunteer 5 hours and am interested in
 - ☐ Site maintenance
 - ☐ Path maintenance
 - ☐ Fall cleanup
 - ☐ Composting
 - ☐ Garden information sharing
- I am interested in serving on the Community Garden Committee Yes No
- I/We will not hold the City of Bellingham, its agents, employees and volunteers, or anyone otherwise involved in City of Bellingham Parks' programs for which I am participating responsible for any accident or injury that might occur, negligence notwithstanding. I therefore hold the City of Bellingham and its employees and agents harmless and release and waive all claims against the City of Bellingham and its employees and agents that arise from my/our volunteer activities. Further, I/we acknowledge that we are undertaking this activity voluntarily, assume all risks associated with participating in the Community Garden Program.
- I/We, realizing no insurance coverage is provided for the participant, will assume financial responsibility for any cost relating to any accident or injury that might occur while participating in above named program.
- I/We grant permission to the City of Bellingham and its sponsors to us photographs, motion pictures, personal data, recordings or any other record of this event for legitimate purposes.
- I/We grant permission to the City of Bellingham and its sponsors to us photographs, motion pictures, personal data, recordings or any other record of this event for legitimate purposes.
- I/We grant permission to share contact information with the Garden Committee for garden communications.
- I/We understand that failure to comply with Community Garden Rules & Responsibilities may result in cancellation of program participation and garden plot reassignment.

Signature: _____ **Date:** _____

Emergency Contact: _____ **Phone:** _____