

Parks and Recreation Department

City of Bellingham

2025 Community Garden Plot Registration-New Plot Holders

The City of Bellingham maintains three Community Gardens in Bellingham:

| Fairhaven Garden | Sven Hoyt Garden | Lakeway Garden | King Mountain |
|-----------------------------|--|-----------------------|-------------------|
| 10 th and Wilson | 32 nd St between Taylor Ave | Lakeway and Woburn St | 325 Van Wyck Road |
| | Donovan Ave | | |

All four gardens are open year-round. Plot registrations are per calendar year. New gardeners are encouraged to visit the Community Garden site, evaluate plots and speak with our office to answer any questions before open registration begins in January.

You may register for a plot by filling out the registration paperwork and bringing it in person, send by mail or email parks@cob. org. Once your application has been approved you can pay in person M-TH 8:30am – 4:00pm or over the phone M-F 8:30am-4:00pm.

This is a fillable PDF or if printing and filling in the blanks, please write legibly.

| NameAddress | | |
|--|-----------|----------|
| City | Zip | |
| Phone (home) | Alternate | |
| Email Address: | | |
| Gardens: | | |
| King Mountain Garden (2 plot maximum) (\$30 10x10) (\$20 3X7) | Plot #1: | Plot#2: |
| Fairhaven Garden (1 plot maximum) \$50 | Plot # 1: | |
| Sven Hoyt Garden (2 plot maximum) \$50 | Plot # 1: | Plot #2: |
| Lakeway Garden (2 plot maximum) \$50 | Plot # 1: | Plot #2: |

Main Office

210 Lottie Street Bellingham, WA 98225 Phone: (360) 778-7000 Fax: (360) 778-7001 Email: parks@cob.org www.cob.org/parks Operations 2221 Pacific Street Bellingham, WA 98225 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 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/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 use 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: | |