

Community Garden Plot Application 2024 Season

Note: garden plots will be assigned on the following first come, first served basis: 1) eligible returning gardeners; 2) Plymouth residents; 3) metro area residents FIRST NAME: LAST NAME: LAST NAME: STREET ADDRESS:______CITY, ZIP:_____ CELL PHONE _____WORK PHONE_____HOME____ Ir you rented a plot last year, indicate the plot number/s:_____ Maximum of 2 plots during initial registration. Item Cost per plot Quantity Total Garden plot \$60 Veteran discount -\$5 Returning gardener -\$5 discount Grand Total Enter the plot/s you wish to rent: 2nd choice 3rd choice 1st choice___ I am interested in a third plot if one becomes available. PAYMENT: Cash/check_____VISA_____MASTER CARD____AMEX_____ (Checks payable to WMLCC) Credit Card Number: ______ Security Code:_____ Signature___ Return completed application form, signed rules agreement and payment to: West Medicine Lake Community Club, % Community Garden 1705 Forestview Lane North, Plymouth, MN. 55441 FOR OFFICE USE ONLY: Club Member: Yes___No___ Returning gardener: Yes___No___ Eligible? Yes___No___

Date received: Processed by CC approval

1st plot number 2nd plot number 3rd plot number