



APPLICATION FOR COMMUNITY GARDEN MEMBERSHIP

Names(s) _____ Telephone _____

_____ E-Mail _____

Address: _____

Are you currently a member of the WSWCA? YES NO
WSWCA members receive priority placement for Community Garden vacancies.

Which WSWCA Community Garden are you interested in joining?

First Preference

Second Preference

Sartain

Sartain

South Street

South Street

Waverly

Waverly

Acceptance by WSWCA of this application and the accompanying fee does not guarantee placement of the applicant(s) in a WSWCA Community Garden. Garden vacancies are filled from the wait list for each garden. An additional payment will be required when gardening privileges are assigned, at the prevailing annual fee. All WSWCA community gardeners must agree to the WSWCA Community Garden Rules as a pre-requisite to garden participation.

I/we understand and agree to the WSWCA Community Garden Rules and to the above conditions.

Name _____ Signature _____ Date _____

Name _____ Signature _____ Date _____

A one time, non-refundable fee of \$20.00 must be submitted with this application. Send application and fee to WSWCA, 1100 Walnut MOB, Room B113, Philadelphia, PA 19107