



COMMUNITY GARDEN

APPLICATION

Name: _____

Address: _____

Phone: _____ Email: _____

____ New Application

____ Renewal Application, if renewal do you want previous year's plot? YES/NO

Number of Plots:

____ (1) One \$15.00

____ (2) Two \$25.00

____ (3) Three \$40.00

____ (4) Four \$50.00

Payment Method:

____ CHECK ____ CREDIT CARD

(Please go to <http://payment.cityscapesinc.com/payment/> to use a credit card to pay. For Invoice Number, please input "GARDEN" and Company Name, please input "CITYSCAPES".)

Make checks payable to **CityScapes Inc**

Send application with enclosed payment to CityScapes Inc. Attn: Community Garden, 4200 Lyman Ct, Hilliard, Ohio 43026

Or drop off at 4200 Lyman Ct, Hilliard Ohio 43026 between the hours of Monday –



cityscapesinc.com/about/gardens



COMMUNITY GARDEN

APPLICATION

RELEASE OF ALL CLAIMS AND PROMISE NOT TO SUE

As a participant in the CityScapes Community Garden, I _____, being of sound mind and cognitive awareness, recognize and acknowledge that there are certain risks inherent to this activity and I agree to assume all such risks including any damages to property, or any other loss which I may sustain as a result of participating in any and all activities connected with or associated with this program.

In consideration of CityScapes accepting my registration application, and with the intent to be legally bound, I hereby, for myself, all heirs, executors, administrators, and assignors, do hereby forever release, waive and relinquish all claims I have or may have as a result of participating in this program, and CityScapes' officers, agents, servants, employees and insurers, from any and all liabilities, claims, demands, actions or causes of action resulting from physical injuries, including death, loss of services or consortium, loss or damage to property, or any other loss which I may have or my child may have, or which may accrue to me on account of my participation in this and all other CityScapes programs.

Signature of Participant

Date

Signature of Parent/Guardian if Minor is Under 18

Date

Please sign and date all pages and return to CityScapes at 4200 Lyman Ct to reserve your garden plot.