



P.O. Box 455 · 1400 Main St. · Lakemore, Ohio 44250 - Municipal Building · Phone 330-733-6125 · Fax 330-733-3801

Lakemore Community Garden Rules and Regulations

1. Plot registration begins April 1.
 - a. Plots will be reassigned to returning gardeners first and then on a first come first serve basis.
 - b. When the garden is full, additional requests will be put on a waiting list.
 - c. Plots NOT planted by May 30th will be reassigned.
2. Each gardener must complete a Release of all Claims form before any work in the garden can begin.
3. Attention to plot maintenance is important to the health of the entire garden.
 - a. Planting should be organized in such a way that neighboring plots are not shaded and trailing vines are prevented from overgrowing your plot.
 - b. DO NOT compost weeds that have gone into seed or plants that have disease or pests. Weeds, pests and plant disease can spread quickly in a community garden.
 - c. These plants should be pulled immediately and removed from the site entirely.
 - d. All debris should be appropriately managed before leaving the garden.
 - i. Plant material should be composted.
 - ii. Rocks are deposited in the rock bin
 - iii. Take trash with you
4. Each gardener is responsible for the maintenance and upkeep of their garden plot.
 - e. Watering, weeding, harvesting and any other garden related maintenance are all the responsibility of the gardener.
 - f. Please water only your plot. Gardeners may arrange for other gardeners to water their plots, but only if asked. Otherwise gardens can end up over-watered.
 - g. Do not leave water running unattended. You MUST be present while watering
5. The application of herbicides (weed killers) to the garden plots is prohibited. The use of insecticides and chemical fertilizers is discouraged.



P.O. Box 455 · 1400 Main St. · Lakemore, Ohio 44250 - Municipal Building · Phone 330-733-6125 · Fax 330-733-3801

Lakemore Community Garden Rules and Regulations

6. Garden plots should be cared for at least once a week. If any plot remains unattended for more than three weeks that plot is subject to reassignment.
 - a. If you are unable to maintain your plot for any reason please contact the garden leader and ask fellow gardeners for help. Be willing to help others also.
 - b. When planning an extended absence, please find someone to tend to your plot, as well as manage any weeds or pests.
7. **“If you didn’t plant it, don’t take it.”**
 - a. Harvesting privileges are reserved for the individual or family who manages the plot.
 - b. Anyone caught stealing will be prohibited from returning to the garden.
 - c. Ripe vegetables should be harvested in a timely manner. If you are unable to harvest, please contact the garden leader and ask fellow gardeners for help.
8. At the end of the growing season, gardeners are responsible for clearing their plot of all plant material and leaving the plot as they found it in the spring.
 - a. Plots should be cleaned up for winter by October 31.
 - b. This includes the removal of all annual plant debris and temporary structures.
9. Each gardener is responsible for ensuring that the rules are followed at all times. Please report any problems to the garden leader.
10. Children and pets are welcome in the garden but must be accompanied by an adult and must be supervised at all times. Pets **MUST** be on a leash at all times.
11. **DO NOT bring drugs, alcohol or firearms to the garden.**
12. **NO SMOKING IN THE COMMUNITY GARDEN**

Your community garden leader is: **Tracy Fast**

Phone number: (330)733-6125

Email: tfast@lakemoreohio.org



P.O. Box 455 • 1400 Main St. • Lakemore, Ohio 44250 - Municipal Building • Phone 330-733-6125 • Fax 330-733-3801

Garden Plot Application

Name _____ Date _____

Address _____

City _____ Zip _____

Phone (home): _____ (work) _____

Email: _____

Did you have a garden plot with this community garden last year?

_____ Yes _____ No

If yes, do you want the same garden plot this year?

_____ Yes _____ No

If no, what area of the garden would you like to be in? _____

How many plots would you like to plant? _____

Each gardener is expected to help during the season with general chores. Please mark one area that you would be interested in volunteering with during the season.

___ Site maintenance

___ Fall cleanup

___ Composting

I have read and understand the Lakemore Community Garden rules.

I agree to follow the garden rules and help other gardeners if the need arises.

I understand that failure to follow the garden rules may result in removal from the garden program.

Signature

Date



P.O. Box 455 · 1400 Main St. · Lakemore, Ohio 44250 - Municipal Building · Phone 330-733-6125 · Fax 330-733-3801

LAKEMORE COMMUNITY GARDEN

Release of All Claims

I, _____, am a participant in the Lakemore Community Garden. As a condition of being allowed to participate in the Community Garden, I agree to the following:

1. I am duly aware of the risks and hazards that may arise through participation in the Community Garden, and assume any expenses and liabilities I incur in the event of an accident, illness or other incapacity. If I have had any questions about the Lakemore Community Garden, its nature, risks or hazards, I have contacted the garden coordinator and discussed those questions with him or her to my satisfaction.

2. In consideration of being granted the opportunity to participate in the Lakemore Community Garden, I, for myself, my executors, administrators, agents and assigns do hereby release and forever discharge the Garden Committee, Garden Coordinator, volunteers, other gardeners, and the cooperating landowner from all claims of damages, demands, and any actions whatsoever, including those based on negligence, in any manner arising out of my participation in this activity. I understand that this Release means that, among other things, I am giving up my right to sue for any such losses, damages, injury or costs that I may incur.

I represent and certify that my true age is either 18 years old or, if I am under 18 years old on this date, my parent or legal guardian has read and signed this form. I have read this entire Release, fully understand it, and I agree to be legally bound by it.

Participant's Signature _____

Printed Name _____ Date _____

Parent/Guardian's Signature _____

Printed Name _____ Date _____