



## NEIGHBORHOOD GARDENS TRUST GARDEN INTAKE APPLICATION

**Garden Name**

**Garden Address**

*If you don't know your garden's address, describe the garden's location using the location on the block and nearest intersection.*

**Name of Primary Contact**

**Email**

**Phone Number**

**Name of Secondary Contact**

**Email**

**Phone Number**

**How did you hear about NGT?**

### **About Your Garden**

**How is your garden or open space used? Check all that apply.**

Growing food - individual plots

Open Space for sitting or other activities

Growing food - communal beds

Other

Growing flowers

**Tell us more about how your garden or open space is used. Describe the garden's main features. If you have individual plots, how many garden plots do you have?**



**What year was the garden founded?**

**Describe the approximate size of the garden (IE, square footage, number of lots, or amount of the block it takes up)**

**How many people are involved in the garden (ie, garden members, people who rent plots, or neighbors who help with the space)?**

**Describe who participates in your garden. Do gardeners live in the neighborhood? What is their experience level with gardening? How long have they been a part of your garden?**

**If someone wants to get involved, what is the process for joining? If you have an application process, please describe.**

**Is your garden at capacity for participation for the growing season? For gardens without individual beds, do you have enough members or volunteers to keep your space maintained?**

Yes

No



**If yes, describe how you manage interest in your garden. If you have a waitlist, how many people are on it?**

**Does your garden have written rules, guidelines or by-laws? If yes, please include a copy with your application.**

Yes

No

We're working on creating them.

**Describe your garden's leadership structure and how you make decisions about the garden. Does your garden have a formal leadership structure (committees, officers, etc.) or an informal structure? Do you have votes or elections? Do you have regular meetings? How often do they occur?**

**What are your current sources of funding for the garden? Check all that apply.**

Membership Dues

Donation of materials or supplies (in kind)

Events or special fundraisers

Grants or corporate contributions

Other:



**How do gardeners or visitors access the garden?**

Open access - the garden isn't locked or does not have a fence.

Gate is open to the public during specific hours

Combination lock

Key lock

Other:

**How does your garden access water? Check all that apply.**

From the hydrant

Collect rainwater

From a neighboring property

Fill water barrels

Dedicated water line

Other:

**How do you maintain the garden during the winter season (if at all)?**

**Is the garden associated, affiliated or partnered with other organizations, civic associations, schools or churches? If so, please list below and if the relationship is formal or informal.**



**Describe the ways your garden benefits your local neighborhood or community. If your garden has a mission, if you grow food for donation, or any other ways your garden "gives back," please share.**

**Describe any future plans or dreams you have for the garden. Please include any physical improvements you hope to make in the next five years or any programs or activities you would like to happen at the garden.**

**Finally, please include photos of the garden with your application.**