

**Options Community Garden
Plot Registration**

Date: _____

Name: _____

Mailing Address: _____

City, Zip Code _____

Phone: _____

Email: _____

List others that will be working with you on your plot: _____

What do you plan to grow this season?

For Options Community Garden Use:

Garden Plot # _____

Paid Annual Water Fee: Y / N

Start Date: _____